THE INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS

Vol. XXXII 1951 Part 4

PAUL FEDERN'S SCIENTIFIC CONTRIBUTIONS: IN COMMEMORATION[1]

By Dr. EDOARDO WEISS, Chicago, Ill.

Mr. President, Ladies and Gentlemen,

I gladly accepted your invitation to commemorate Paul Federn by outlining his scientific achievements, for I was very grateful to you for having given me the opportunity to express my admiration for and gratitude to my first teacher in psycho-analysis. I was bound to him by deep feelings of friendship, and had remained in close contact with him, and followed the development of his scientific studies, for more than forty-one years.

Although I wish to devote the time I have for this presentation chiefly to the discussion of Paul Federn's unique contributions to the psychology of the ego, I do not want to leave unmentioned his other important contributions. In 1913 he published 'A Case of Nocturnal Fright, with Subjective Light Phenomena', and from that time on he revealed his psychoanalytic talent, psychological understanding, and scientific originality in many papers. Some of his findings in 'Sources of Male Sadism', in 'Some General Remarks on the Principles of Pain-Pleasure and Reality', and in 'Contributions to the Analysis of Sadism and Masochism' were cited by Freud. In 'A History of a Case of Melancholia' he clearly illustrated the pathogenic process which Freud found typical for melancholia, namely, the patient's identification with an ambivalently loved object.

In 1919 Federn published a pamphlet, *Die Vaterlose Gesellschaft*, which he translated as *The Orphaned Nation: Essay on the Psychology of Revolution*. Although this fascinating study was based on the concepts that Freud had expressed in *Totem and Taboo*, Federn's ideas about the function of the leader in socio-psychological organizations and the development of a democratic brotherly society appeared before and were precursory to Freud's expositions on *Group Psychology and the Analysis of the Ego*.

His papers 'On Two Typical Dream Sensations' and 'The Problem of the "Inhibition Dream"' marked the inauguration of his studies on ego sensations in dreams, and opened a new path for dream interpretation. While the analysis of the dream *per se* often does not indicate the various attitudes of the ego and super-ego towards certain wishes and actions—attitudes which might be expressed by such auxiliary verbs as 'I want to', 'I can', 'I am not allowed to', and 'I should', the consideration of the feelings of the dreaming ego does unmistakably reveal such attitudes.

Federn's scientific curiosity and sharpness of mind were enriched by deep human feelings and a sincere concern not only for the fate of his patients but also for the common welfare. The generosity which was so characteristic of all his personal relationships also extended to a wider field, the desire to share helpful knowledge. He was interested in orienting all possible groups of people in educational and sexual problems and measures for mental prophylaxis, and he devoted many papers to problems concerning mental hygiene, sociology, pedagogy, and family guidance. A close friend of Dr. Heinrich Meng, he edited in collaboration with him *Das Ärztliche Volksbuch* ('The People's Medical Book') and *Das Psychoanalytische Volksbuch* ('The People's Book of Psycho-

[1] Read at the meeting of the New York Psychoanalytic Society, 26 September, 1950. (For the bibliography of the writings by Dr. Paul Federn see *Int. J. Psycho-Anal.*, **32**, 1951, pp. 244–246).

analysis). These volumes were intended not only for physicians but for all educated persons interested in mental hygiene, emotional disturbances, and social problems.

In all his utterances and writings Federn's absolute loyalty to Freud was apparent. He admired Freud as a person and as a scientist, and considered him an outstanding genius of all time. He was fascinated by Freud's writings, took great pains in interpreting every phrase correctly, and was embittered by their critics. His admiration for Freud did not hinder him from going his own way in his investigations, or from revealing in his own concepts his great originality of mind. However, he liked to consider his findings as only confirmations and elaborations of Freud's basic dynamic concepts. Only hesitantly, and after lengthy discussions, did he admit some discrepancies between his and Freud's theories concerning the dynamic structure of the ego.

In his scrupulous honesty Federn was very critical of any plagiarism among scientists, and was disgusted with anyone who sought popularity at the expense of scientific courage.

The field of Paul Federn's most extensive and original investigations is that of ego psychology. To this field he contributed certain entirely new basic concepts. Through his deep insight into the ego's dynamics and mechanisms of functioning, he also succeeded in developing specific therapeutic procedures for the treatment of ego disturbances, especially of psychoses.

When I last saw Dr. Federn at Christmastime last year, he knew that he would soon die. He said to me, ' Don't grieve when I am gone, for I have already written what I had to say in the field of ego psychology.' He felt that his task was completed. Yet another task remains to be done in order that his work may receive a wider understanding and acceptance than were achieved in his lifetime; the publication of a definitive volume of his published and unpublished papers on the ego. The task of collecting and organizing these papers is under way.

The numerous papers on ego psychology that Federn published in the past thirty years are certainly well known to you. But because so many of his concepts were basically new, were worked out experimentally over the course of the years, and were not definitely expressed in any one particular paper or group of papers, many students have been unable to appreciate their major significance. At best it is never easy for an investigator to present his matured concepts to those who have not accompanied him along the diverse paths which led to his discoveries. In order that others may understand and appreciate, it is necessary to retrace those paths and to formulate the new concepts with the utmost clarity. I shall attempt such a clarification, very briefly, to-night.

Federn's ego psychology is based on the accurate description of the subjective experiences of healthy as well as diseased persons. He himself was endowed with an exceptional introspective capacity. He expressed the fact that the ego is an *Erlebnis*—that is, a subjective experience—by equating the ego with the *sensation* of one's own ego, which he calls ' ego-feeling '. Freud used the latter term perhaps twice, but did not examine closely the concept indicated by it. The phenomenon of self-experience itself, the *Erlebnis*, cannot be explained.

Before the days of psycho-analysis, psychology was only psychology of the ego, and the phenomenon of ego-feeling was called ego-consciousness. Paul Schilder speaks of consciousness of one's personality and its somatic organization. But ego-feeling is not the same as consciousness; there are conscious object-representations which refer to data that do not belong to the ego. The ego-feeling is the discriminating factor between ego and non-ego. This term was chosen by Federn in preference to the older term ego-consciousness because it indicates that one's own ego is not merely known but *felt* to be such. Federn applied the term only to those contents which are sensed as participating in the coherent ego unity, in a distinct entity, opposed to external reality. Federn recognized that the ego is an actual continuous mental experience. It is not merely a mental abstraction; neither is it the sum of all conscious interrelated phenomena nor the integrative function of the mind.

It is not theory but an exact description of an experienced fact when one speaks of investment of continuously changing mental contents with the unifying, coherent ego-feeling. In his discussions with me Dr. Federn gave clear expression to the phenomenon of investment of mental contents with ego-feeling, or their divestment of it, by using the terms *Ver-ichung* and *Ent-ichung*, which might be translated as ' egotization ' and ' de-egotization ', respectively. Although the ego experience passes from one state to another, it is felt as continuous,

and is re-established after transitory interruptions, as during dreamless sleep.

As long as the ego functions normally one may ignore or be unaware of its functioning. As Federn says, normally there is no more ego-awareness than there is awareness of the air one breathes; only when respiration becomes burdensome is the lack of air recognized. The ego-feeling is the feeling of unity in regard to continuity, contiguity, and causality of the individual's experiences. In waking life the sensation of one's ego is omnipresent but undergoes continuous changes in regard to its quality and intensity. Slight disturbances and variations of ego-feeling are a matter of common experience and ordinarily subside unobserved. When tired or drowsy, we feel numb; upon waking from a refreshing sleep, or upon receiving exciting news, we sense an invigorated ego-feeling.

The ego phenomenon can be studied in its dynamic, economic, and topographical aspects; in other words, from a metapsychological point of view. To account for the fluctuating intensity of the ego-feeling and the energy required for the various mechanisms of the ego, Federn postulated the existence of a specific ego cathexis, thus passing from a mere description to theory. The adoption of metapsychological considerations in the study of the ego is as justified, and as illuminating, as was Freud's introduction of metapsychological formulations in psycho-analysis in general. In describing the ego defences and the various functions of the ego, Freud actually considers manifestations of ego cathexes, although he does not call them by this name.

It must be borne in mind that Federn never asserted that his theories could explain the phenomenon of the ego-*Erlebnis*—the ego experience—itself. Rather, he provided valuable dynamic and economic orientations which have been very helpful in the therapeutic approach to the psychoses.

Correlating the ego cathexis with the ego experience, Federn assumes that the metapsychological basis of the ego is a coherent cathexis unity. And to account for the various specific qualities and manifestations of the ego he further assumes that the ego cathexis must be a compound of libido and of that energy which expresses dynamically Freud's death drive. Not every energetic manifestation in the individual is an expression of ego cathexis; for example, the drives which have to be mastered by the ego are not fed by ego cathexis. It constitutes only a variable portion of the total cathexis in the individual; it is at the disposal of the ego for its dynamic functioning, and can be exhausted and restored, lighting the ego to varying intensities.

Since his definitions were often misunderstood and misinterpreted, I should like to repeat that Federn describes the ego as an experience, as the sensation and knowledge by the individual of the *continuity* of his bodily and mental life. This continuity is felt and apprehended by him as a unity. Federn never said, as has been implied, that the ego is synonymous with cathexis or libido; in his metapsychological definition of the ego he speaks only of a cathexis, of which the ego libido is a component. In this definition he says that the metapsychological basis of the ego is a state of cathexis of certain interdependent bodily and mental functions and contents, the cathexes in question being simultaneous and interconnected, and also continuous. The nature of these functions, and the centre round which they are grouped, are familiar.

Federn made a distinction between the bodily and the mental egos. Originally the only ego is the mental ego. With the discovery of one's own body and of the physical world in general, a bodily ego which includes the whole physical world is differentiated. Later, the bodily ego cathexis is withdrawn from the 'non-ego' areas of the external world. The excluded parts of the external world, thus de-egotized, are recognized as objects. Memories and representations of one's self have a mental ego cathexis and deal with ego-cathected contents; those of external objects are ego-cathected as mental data but their contents are unegotized. The latter are object representations and their contents are felt as imagined and unreal.

From an accurate study of the dreaming ego it appears evident that the mental and the bodily ego are felt separately, but in the waking state always in such a way that the mental ego is experienced as being inside the bodily ego. The bodily ego is not identical with Schilder's body image or body scheme. Only when the body image is completely invested with ego-feeling does the actual feeling of the bodily ego correspond to the entire body image. Conversely, the sensation of the bodily ego can disappear without disturbing the unity of correctly ordered perceptions of one's own body.

Federn's analysis of the various forms in which the ego libido—that is, the libidinal component of the ego cathexis—manifests itself, and of the economic conditions which constitute ego strength and ego weakness, together with his concept of narcissism, led him to some views which are at variance with certain statements of Freud.

The ego, as Federn reminds us, is subject and object at once. As subject, it is known by the pronoun 'I'; as object, it is called 'the Self'. The ego is the bearer of consciousness, yet the individual is conscious of his own ego; a circumstance which Federn characterizes as the 'unique paradox' by which the ego differs from all other phenomena.

The ego as subject is experienced in various modes which can be indicated in terms made familiar by grammar. The *active* ego cathexis is experienced in the ego's planning, thinking and acting, and, in its most elementary form, in the phenomenon of attention. The *passive* ego cathexis determines the ego's need for stimuli. The *reflexive* cathexis is manifested in self love or hate. However, in its original and most primitive form the ego cathexis, or rather the ego-feeling, cannot be classified according to these three categories, but rather by the middle voice, as it is used in the classical Greek language. In English grammar the middle voice is expressed by certain intransitive phrases such as 'I grow', 'I thrive', 'I live', 'I prosper', 'I develop', and, in the case of a predominant destructive component, by 'I perish', 'I age', 'I die'. Federn termed this neutral, objectless form of ego cathexis *medial* cathexis.

Federn considers as *primary narcissism* only the original manifestation of the ego libido; namely, the medial one. He regards this *medial* libido as the source of the ego's sense of gratification in its very existence, the reason for which prospering, growing, and living in itself are felt as pleasurable. This concept of 'primary narcissism' is more strict than that of Freud, who includes in the term the reflexive as well as the medial ego libido. In Federn's opinion it is the medial libido component of the ego cathexis which is responsible for the feeling that everyday life, with its sensations and its motor and intellectual functions, is not an empty, dull, or disagreeable experience, but a pleasantly familiar one. Body and mind combine to procure for the ego this enigmatic enjoyment of life in itself. Every ego function, bodily as well as mental, carries some of the self-enjoying primary narcissism. External libidinous interests are continuously added, through the experience of life, to this original narcissistic cathexis.

If the libidinous component of the medial ego cathexis is withdrawn, or is not supplied in sufficient quantities, then the individual feels a disagreeable change in his vitality and self-unity. As long as only the libidinous component is lacking, the integrative function of the ego persists, but the *familiar feeling* of an integrative balance is impaired.

Federn regards the morbid ego-feeling which characterizes depressive states as the most convincing proof of the existence of a death drive. When the destructive component of the medial ego cathexis becomes predominant the patient is unable to enjoy anything, nor does he recall pleasant experiences of the past. He dislikes everything in his existence and has the urge to cease to exist. As every psychiatrist knows, this destructive component also overflows into object relationships. In Federn's opinion the destructive component of the ego cathexis manifests itself in will power and determination when it is well fused with an adequate amount of libido.

Federn explained the sense of reality and its disturbances, such as the feeling of estrangement from external objects and the phenomena of hallucination and delusion, on the basis of one of his most important concepts; namely, that of the *ego boundary*. Unfortunately, this concept has not been well understood by many of his readers.

Freud's theory of the ego undertook the task of localizing exactly the boundary between mind and world of objects, and dealt only with the elementary process of consciousness, which Freud describes, in his topographic description of the mental apparatus, as a peripheral process. Federn's concept of the ego as a dynamic entity, with a core or nucleus surrounded by an ego boundary as its peripheral sensory organ, is new.

Healthy individuals are not ordinarily conscious of the presence of the ego boundary. In the beginning self-observation in this respect is somewhat difficult. However, every healthy individual distinguishes, without difficulty, in waking life, between the perceived objects of the external world and his thoughts and memories. When he directs his attention simultaneously inside and outside the ego he senses

clearly what is included in and what is excluded from the ego-cathected field. This dividing line between what Federn calls, in two well-chosen terms, ' inner mentality ' and ' external reality ', is the ego boundary. Every mental element has a topographic relation to the ego boundary: either it is included in or it is excluded from investment by the cathexis which is experienced as the ego. When it is included within the ego, that is, when it participates in the ego, it is experienced as mental, as ' thought of ' only. Conversely, when it is excluded from the ego it is sensed as a real object without the aid of any reality testing. Whenever an impression, be it somatic or mental, strikes a normally cathected ego boundary, one becomes aware of it. So long as no impression impinges upon the boundary one is unaware of the dividing line between ego and non-ego; that is, of the ego boundary.

The external ego boundary lies between ego and external reality; the internal boundary separates ego from id. In the normal perception of external objects it is not the entrance of stimuli through the sense organs which conveys to the individual the sensation that the objects are real, but the entrance through the external ego boundary, of which the sense organs constitute normal apertures. Only when these apertures participate in the dynamic boundary are the stimuli entering through them sensed as external reality. In certain ego disorders the objects of the external world, however clearly perceived through the sense organs, are felt as unreal. Federn explains this occurrence by assuming that the part of the ego boundary which includes the sense organs has lost its libidinal cathexis. The objects perceived lose their familiar character; the environment is felt as lifeless, like changing pictures on a screen. In the process of recovery the slightest increase of libido cathexis on the boundary is recognizable: the perception of the objects becomes warmer, the objects themselves are sensed as having a pleasantly increased vividness.

Such observations led Federn to conceive the external ego boundary as a sense organ for all perception of reality. (' Perception ' as ordinarily used implies both sensory awareness and recognition of external stimuli. Here we use the term more specifically to indicate only sensory awareness.) When the libido component of the external boundary is diminished, the feeling of familiarity and warmth adherent to object perception is impaired. That it is not a diminished object libido which is manifested in this disturbance is proved by the fact that a strong interest in objects can be maintained even though the objects themselves are sensed as estranged. While perception is a function of the boundary of the bodily ego, apperception is a function of the core or nucleus of the mental ego. The mental ego confronts all new impressions with previous ones and relates them in time, place, and causality to its acquired knowledge. Deadness and coldness of an impression is due to estranged perception, unfamiliarity to estranged apperception.

As a rule, the individual is unaware of his inner, mental ego boundary. Every mental stimulus which crosses the inner boundary from the id without obtaining ego cathexis is sensed as external reality, precisely like the objects of our sensory perception. The existence of the inner boundary can be experienced while one is falling asleep and the cathexis of the ego and its boundaries is fading. Then stimuli from the id begin to cross the weakened boundary, and hypnagogic images—that is, hallucinations —ensue. If one fights sleep, the inner boundary regains its cathexis and such images disappear.

Federn's dynamic description of sleep is, in some respects, in contradiction with Freud's concepts. Perhaps this contradiction is only apparent. In dreamless sleep the ego fades away, its cathexis is withdrawn, perhaps into the id or the biological organism. If we accept Freud's assertion that in the state of sleep the ego regresses completely to the primary narcissism, we extend the concept of narcissism to include the libido invested in the whole organism and not only that invested in the ego. We should adopt, as it were, an egomorphic concept of the whole organism, including the id, and the very structural concept of the mind would be lost.

Mental contents which form the dream only partially awaken the ego, and sometimes awaken it only to some of its former states. Many old and recent memories, and such attributes as its rational capacity, may remain dormant. One important finding of Federn is that not only drives but also ego states can be repressed. This can be proved experimentally by hypnosis, through which repressed ego states, with their particular contents and boundaries, can be aroused to consciousness. In Federn's opinion the unconscious portion of the ego consists of the stratification of former ego states, including those of earliest childhood.

Federn gave much attention to the dreaming ego. In waking life a bodiless ego feeling would be a dreadful sensation; yet in most dreams one can recognize retrospectively that one's body was not felt. Dreams during general anæsthesia are especially apt to prove the distinction between mental and bodily ego, since one's body cannot be awakened. In normal sleep some affects and the will may arouse bodily sensations, but such sensations, if too strong or too persistent, put an end to the state of sleep. Usually the dreaming ego perceives its dreams passively, for the will is, according to Federn, the concentration of active ego cathexis towards an action or thought, and not merely a 'foreknowledge' of the action, thought, or planning that is going to occur.

The feeling of one's identity is connected with the mental ego, since one feels oneself to be the same upon awakening as during dreaming. In dreams with complete absence of bodily ego feelings some dream figures always represent some parts or states of the dreamer's own ego. Such portions of the ego, remaining excluded from the retracted boundaries of the dreaming ego, appear as external objects; that is, projected on dream persons. In such cases, upon awakening, the ego does not feel identical with these dream persons who appear in their bodily aspects. In *The Interpretation of Dreams*, Freud recognized that some dream persons must be interpreted as the dreamer's ego, or part of it.

The phenomenon of identification consists of the inclusion in the ego of an object or its autoplastic duplication, so that the ego feels that object as part of itself. Mere imitation is not internalization of the object in question. Only when the ego cathexis extends itself over the product of imitation can we speak of identification of the ego with an object. In mental conflicts, distinct ego-feelings are associated respectively with the ego and super-ego. Identification has an economic implication: the more identifications an ego maintains, the more ego cathexis is thus employed. Therefore, identifications that are too numerous and too complete may cause a relative ego weakness. Conversely, when the afflux of ego cathexis diminishes fewer identifications can be maintained. With the onset of sleep the super-ego loses its ego cathexis before the nucleus of the ego, and in the process of awakening the super-ego awakens after the ego.

Federn's views on the binding function of the ego cathexis corroborate Freud's statements concerning the dynamic working patterns of the pre-conscious. Federn frequently refers to the early concepts of Breuer and Freud in regard to free-floating, or movable, and 'fixed' (bound) energy. The process of 'fixing' (binding) the free-floating cathexis, which is characteristic for the pre-conscious, and which Freud calls the secondary mental process, is performed by the ego cathexis. It consists of the investment of id elements by ego cathexis, whereby they are integrated in time, space, and causality. The stronger the binding capacity of the ego cathexis, the better can the ego resist frustration and postpone and renounce gratification. The counter-cathexes of which the inner ego boundary consists and which maintain repressions are also ascribed to the ego by both Freud and Federn.

According to Federn, the inclusion of a mental element in the coherent ego unity coincides with its participation in the pre-conscious, the territory over which the ego extends itself. In fact, Federn asserts that the ego-feeling itself extends permanently over the pre-conscious, although only few elements are conscious at any given moment. Precisely because of this condition, every healthy person has confidence in his ability to behave and express himself in a coherent way. We have the subjective feeling that we are disposing coherently of our pre-conscious data. When we want to go to a familiar place we have the confident feeling of knowing, at any turn, which way to take, although the single landmarks along the route will not be simultaneously conscious to us. We *sense* whether the behaviour or utterances of other people are consistent, although the perceived impressions steadily disappear from consciousness, and new impressions continuously enter, in a continuous flow. It is the ego cathexis, and not consciousness, which permits us to function in an integrated way.

In agreement with Jaspers, Federn makes a distinction between 'sense of reality' and 'reality testing'. The discrimination between the data which are *felt* as pertaining to the ego and those *felt* as belonging to the non-ego is a matter of a particular *sensation*, of the 'sense of reality', and does not rest on the functioning of reality testing. Freud describes the most elementary testing of reality in his *Interpretation of Dreams*. If a perception persists when the infant turns his head or closes his eyes, it is

recognized by him as derived from inner stimulation, as unreal; if the perceived content changes direction or disappears and re-appears in relation to given movements, it is recognized by him as existing in the external reality. But this primitive testing constitutes only a first device for the establishment of the external ego boundary; it loses its function once the dynamic boundary is established. The individual no longer needs to perform movements in order to sense what is real and what is only imagined. In progressive development reality testing becomes much more complex and serves the purpose of facilitating the recognition of realities, whereby the individual arrives at different degrees of certainty or doubt in regard to external facts.

In Federn's opinion, what is sensed as real cannot be reversed by any reality testing or reasoning. A psychotic person senses the contents of his delusions and hallucinations as real because they arise from mental stimuli which actually enter consciousness without obtaining ego investment, and not because of defective reality testing. In order to create an agreement between his false realities and the correctly recognized data of the external world, he may construct proper rationalizations and resort to secondary elaborations of the original unconscious contents which invaded the ego from without its inner boundary. This is not reality testing, but rather a mental function compensatory to the omitted reality testing for which the patient feels no need. It is an attempt to mend the disturbed integration of the ego.

The primitive reality testing performed by movements rests on the distinction between *without* and *within*, as related to the whole organism; while the sense of reality discriminates between *within* and *without* in relation to the ego only, not even to the whole mind. As long as an id content which reaches consciousness is not included within the ego, it is sensed as belonging to the non-ego; that is, to the external reality. This is quite in agreement with Freud's characterization of the id as the *inner foreign country*.

Federn's concept of the function of the ego cathexis led him to accurate studies of the feelings of estrangement and depersonalization, which I can only summarize in this presentation. He studied these phenomena not only in severe pathological cases, but also in certain ego states within the range of normality, as he could observe them within himself and as they were communicated to him by his patients. Previously such feelings had been considered as expressions of derangement, loss, or frustration of object relationships. Federn demonstrated that estrangement is due to libidinal deficiency of the ego boundary, and marks a step towards the loss of the sense of reality. Depersonalization is due to a deficiency of libido in the core or nucleus, and was characterized by Federn as ' ego atony ' or as a ' loss of the ego's inner firmness '. States of depersonalization such as Nunberg observed at the onset and resolution of a neurosis are transitory, and are due to structural displacements.

Urges, affects, and emotions can come to the ego's awareness without being included in the mental ego. Such an occurrence is experienced as an uncanny sensation of estranged affects and emotions, which is described by psychotics, especially by melancholics, as the feeling that their emotions are unreal, that they do not belong to them. Normally urges and affects which do not participate in the ego are repressed, and the inner ego boundary resists their invasion. When opinions and expectations break through a too weakly cathected inner ego boundary without obtaining ego cathexis, they are experienced as delusions, as false realities.

Federn analysed many other functions of the ego cathexis. As an example, I may mention the process of conceptual or abstract thinking, and its impairment in schizophrenia, as observed by Kurt Goldstein and others. Federn characterizes the psychopathology of schizophrenia as narcissistic because of a lack, rather than an increase, of ego libido. He asserts that both the dreaming and the schizophrenic egos are weak. The dynamic deficiency, the reduced ego cathexis, leads to a devastation of all kinds of mental functions and to the characteristic psychotic quality of mental production. Federn does not share Freud's opinion that delusions and hallucinations constitute restitution phenomena for the loss of contact with the world of objects. He observed hallucinations and delusions in his patients long before they withdrew object cathexis. In his opinion, these phenomena result from lesions of the ego itself and are not attempts at restitution. They are due to a lack of ego cathexis at the boundary, just as is the case with the dreaming ego. The ensuing fusion of false and actual reality is one of the reasons for the impairment of the thinking

function. But deficiency of ego cathexis deprives the patient also of the ability to use one of his most important attributes—controlled conceptual thinking.

Abstract concepts are formed from common elements contained in different situations; that is, in different ego states. These elements must be isolated, sensed, and recognized as such, purified from all other additional contents of the specific ego states. For this process of isolation and purification a certain amount of energy—ego cathexis—is employed. Therefore, deficiency of ego cathexis deprives the individual of the ability to think of *a* tree, *a* house, or *a* table; he will be able to reproduce in his mind only the memory of concrete, really seen, trees, houses, and tables.

In ego cathexis deficiency, a highly developed ego cannot maintain its boundaries sufficiently cathected, and therefore it is exposed to an invasion by the unconscious. Regression to a former ego state, which requires less expenditure of ego cathexis, can constitute a defence measure against false realities. Upon return to a former state, the boundaries will retract accordingly, but as such they will be intact. Subjection to false realities, regression to former ego states, and loss of the ability for abstract thought are the main pathological features of schizophrenia.

An exhaustive exposition of the therapeutic procedures which are dictated by the application of Federn's concepts, especially in the treatment of the psychoses, would require a volume. I should like to enumerate only a few important points. The guiding principle in dealing with psychotic patients should be to help them to spare, not to waste, mental energy. The deficiency of ego cathexis can be due either to a lack or to an uneconomic apportionment. The patient's positive transference is even more important than in the classical psycho-analysis of neurotic patients. In the treatment of psychotics only the positive transference, which should not be analysed, can be used, and every kind of negative transference should be avoided as much as possible. The patient should not be deceived under any circumstance, and should be helped to solve his current life problems with the aid of his family and environment. The latter should be modified to meet his needs. No treatment of psychotics can be successful without a skilled woman helper, a mother or sister figure; a mother transference to a male therapist confuses a psychotic patient, because he is unable to distinguish this feeling from a homosexual one.

In dealing with the patient's unconscious and his resistances one must proceed in a way opposite to that adopted with neurotic patients. The broken resistances of the psychotic patient must be re-established; repressions should not be lifted but produced. Too much unconscious material, more than can be dealt with, has already invaded the psychotic ego. Every sort of claim must be moderated, and emotional hardship reduced.

It is imperative not to take the anamnesis—the history—of a psychotic patient, since the memories of former psychotic episodes may lead to a relapse. In the case of recently formed delusions the boundary between mental and real can be re-established by proper procedures, but not by reasoning, which is ineffective in regard to contents which are felt as real. Psychotic patients are very accessible to explanations of their psychotic mechanisms.

But there is no time for more. I am aware that I have not conveyed to you the full importance—I would say, the greatness—of Paul Federn's work in ego psychology. I hope only that I have cleared away certain misconceptions and opened a path for further study. Let us trust that many younger analysts will follow his footsteps; that will be his true memorial.

(Received, 10 December, 1950)

PAUL SCHILDER'S CONTRIBUTION TO THE THEORY OF THOUGHT-PROCESSES [1]

By DAVID RAPAPORT, PH.D.,
THE AUSTEN RIGGS FOUNDATION, STOCKBRIDGE, MASSACHUSETTS

Ladies and Gentlemen,

I feel awed and privileged to be here to give your Schilder Memorial Address—awed by the task of sketching Schilder's contribution to the theory of thinking, and privileged by the opportunity offered. Let me hasten to say that it is due to Dr. Lauretta Bender, and the chance by which she discovered that I am familiar with and have studied most of Schilder's writings, have become involved in them and, through them, in the man Paul Schilder. I became acquainted with Schilder's writings in the course of my studies on the psychology of thought, over the last fifteen years. I am delighted to have the opportunity to talk about Paul Schilder. Let me tell you why by way of a story: there was once a king who was entertaining another one. And since he was the king who had originated the idea that a king should have a cabinet, he introduced his cabinet to his guest. The guest asked who was the most important member of the cabinet. The king pointed to one so far not introduced. 'And what is his portfolio?' asked the guest. 'Oh, he is the Minister without Portfolio'—and, seeing the bewilderment of his guest, he added—'He knows what the rest of them are doing, and tells me about it.' That is how I feel about Paul Schilder. Indeed there is hardly any area of psychiatric and psychological problems which Schilder did not recognize, tackle, and illuminate; scarcely a syndrome which he did not study, whether *schizophrenia*, *mania*, *depression*, *aphasia*, *amentia*, *paresis*, or *Korsakoff*; hardly a function which he did not explore, whether memory, perception, consciousness, motility, language; few indeed are the problems with which he did not deal, whether they pertain to the form varieties of conscious experience, psychosomatic relationships, neuro-psychological interrelations, epistemological foundations of our relation to reality, or the nature of man's socialization; and exceptional the psychiatric phenomenon or symptom which he did not describe, whether depersonalization, *déjà vu*, or body-image. His was an encyclopædic mind—he was a psychiatric polyhistor in our time.

To-night I would like to discuss three topics. First, I would like to demonstrate that it is worth while for psychiatrists to be concerned with the theory of thinking, indeed that the theory of thinking is in a way a measuring rod of the status of the theory of psychiatry. Second, I would like to discuss some of the salient contributions of Schilder to the theory of thinking, demonstrating that in many ways he pointed early to theoretical developments which we have only recently reached, and still points ahead to much that is yet to be reached. Finally, I would like to discuss the present state of psychiatric theory—characterized as it is by competing factions—to establish Schilder's position in this picture, in the hope of contributing something to the understanding of the role of the individual scientist and of the meaning of factions in the development of a science.

I

Let us then turn to the theory of thought-processes. What is the basic paradox with which any broad theory of thinking has to cope? Excepting a few 'die-hards' all agree that human behaviour, and thus human thought also, is motivated by fundamental needs, drives, or instincts, if you please. Yet human thought so motivated is adapted to the reality of objects and society. How to reconcile the motivatedness with the social, as well as objective, reality-adaptedness of thought, is the basic paradox faced by the psychology of thinking. Indeed this is the question faced by every psychiatrist

[1] Schilder Memorial Address given to the Schilder Society, New York, 18 January, 1951.

treating every patient. But in therapy the patient's own synthetic forces, as well as the psychiatrist's intuition, steadily cope with this problem and prevent it from emerging in stark nakedness. In theoretically treating this problem no such merciful disguises obtain. The stark nakedness of the problem becomes threatening and the paradox is faced by but a few giants. Freud saw it clearly. He described those thought-processes which prevail when primary, unconscious motivation exerts its effect directly, as for instance in dreams. He discerned and described their mechanisms, such as condensation, displacement, substitution, symbolization, and labelled them the primary process. He saw clearly that in everyday life superimposed over the thinking organized in terms of the primary process, a different kind of thinking obtains which abides by the laws of logic and is adapted to social and objective reality—this he labelled the secondary process. He devoted incomparably more interest to the exploration of the primary process than to that of the secondary process, and it may seem that he solved the paradox by erecting a dichotomy (1). Actually in the seventh chapter of *The Interpretation of Dreams* (2), in ' Wit and its Relation to the Unconscious ' (3), and in the papers ' Formulations Regarding the Two Principles in Mental Functioning ' (4), ' Repression ' (5), ' The Unconscious ' (6), and ' Negation ' (7), he laid down the corner-stones for the exploration of the secondary process, and indicated that he did not regard the dichotomy as hard and fast. Not only was this little noted, but two decades after the first publication of *The Interpretation of Dreams* we find Freud complaining in a footnote to a new edition that even as regards the primary process, people are concerned mainly with rules of thumb for finding the latent dream thought in the manifest dream content, and utterly disregard the dream-work by which the latent thought is translated into the manifest content—that is, the primary process. He reiterated that the dream is primarily a thought-process. He was aware that his followers became interested, to the exclusion of almost everything else, in the content of thought (8).

Here then is the first demonstration of how the theory of thinking becomes a measuring rod of the status of psychiatric theory: lack of interest in theoretical foundations is early expressed by disregard of thought-processes in favour of thought-content. The central role of the theory of thinking in psychiatric theory becomes more generally clear if we call to mind that, for instance, the obsessional person is one with a certain personality organization and drive dynamics, but that the obsessive compulsive activity, characterological or symptomatic, is prepared for by thought-processes which are interposed between the personality organization and drive dynamics on the one hand, and the obsessive compulsive behaviour or symptoms on the other. And this also holds for other kinds of personality structures and their expression in behaviour. Personality organization and drive dynamics translate themselves into behaviour and symptoms through thought-processes, and indeed the psychiatrist in his everyday work deals with these mediating processes rather than directly with the symptom or directly with the personality. Direct dealing with the symptom we usually regard with healthy scepticism, and as for dealing directly with the personality, we do not even know how to go about it. While content often serves as a reliable guide to the relation of symptom and dynamics, fundamentally only the dynamics, economics, and topography of the thought-processes give full information as to what is going on. Our intuition may in everyday practice make concern with the formal characteristics of thought-processes unnecessary, but disregard of the latter will certainly leave us out on a limb when confronted with theoretical claims such as those of Sullivan, Fromm—or in one word, the culturalists—who having become involved with the role of culture in personality organization and pathology claim for it the crucial and exclusive position in personality development. What they disregard is again that without the understanding of the mediating processes, which are thought-processes—in the broad sense in which I use this term here (9)—there is no understanding of socio-cultural impact, and that without understanding of motivation and mediation there is no understanding of socialization. Psycho-analysts often retreat from facing the paradox of motivation v. socialization and reality adaptation of thinking, to an exclusive concern with basic motivation and thought content as its indicator. The culturalists also retreat from facing this basic paradox of the theory of thinking, to an exclusive concern with socialization and adaptation, and the derivative motivations corresponding

to these. We can make clear the error of the culturalists only if we do not make the opposite error of considering thought and behaviour only in its motivated and not in its adaptive and socialized aspect as well.

II

Let me turn now to Schilder's contribution to the theory of thinking to show that he did not make either kind of retreat. Schilder faced squarely the question of how thought can be both motivated and adaptive-socialized, which is tantamount to the question of what is the relationship between the primary and secondary process. He saw clearly that primary-process phenomena, such as are encountered in dreams, free association, schizophrenic and other pathology of thought, are also present in the course of normal thinking. We know that Freud was aware of this when he wrote: 'The tendency of the thinking process must always be to free itself more and more from exclusive regulation by the pleasure-principle . . . but we are aware that this . . . is seldom completely successful . . . and that our thinking always remains liable to falsification by the intervention of the pleasure-principle' (10). Schilder, however, went further and demonstrated in various studies summarized in his paper, 'On the Development of Thoughts' (11), that thought formations seen in thought-disorders appear in normal thinking as preliminary phases of problem-solving, remembering, etc. Thus he arrived at the bold generalization that every thought of the human individual undergoes a development before it becomes conscious in its final form. He asserted that this development proceeds from indefinite to definite forms, passing through associatively related ideas, and that in the early phases of this development, imagery is more prevalent, and personal affective influences—that is, primary-process mechanisms—play a greater role than in the later phases of the development, which are increasingly object- and reality-oriented. Accordingly, he considered the pathological forms of thought to result when these processes of thought-development come to a premature close, bringing to consciousness forms which are normally only preliminary phases of thought-development instead of completed thoughts. He also inferred from his observations that even when such thought-developments reach completion, image-like and affect-distorted preliminary developmental forms may come into consciousness alongside the completed thought. It is clear—and Schilder said so—that this conception was based on the idea that ontogenesis recapitulates phylogenesis, a pattern so prevalent in the thinking of the beginning of this century. We need not discuss here the validity of this bold assumption. Some aspects of it have been borne out by recent empirical investigations; compare, for example, R. Schafer (12). Schilder, however—unlike Stekel who offered a similar conception in his *The Polyphony of Thought* (13)—was not satisfied with this solution. Indeed this conception of thought-development would imply that whenever any thought comes to consciousness it is preceded by a battle of the Titans, enacted by all our fundamental impulses, reaching down to and shaking the foundations of our psychological existence, only to give birth to a meek mouse of an idea. Schilder had to get away from this conception, and he did. He studied with great care an array of thought-disorders: aphasia, agnosia, Meynert's amentia, paretic and other dementias, schizophrenia, and neuroses. He came to the surprising finding that in all of these disorders the same fundamental forms of thought-disorder were present (14). He described these in great detail, and in summary stated that they all boil down to the fact: that the whole cannot be differentiated into parts, and the parts cannot be integrated into a whole. What then is the distinctive character of each of these disorders? he asked. The answer which he gave was this: the psychic apparatus is so built that its central core of impulse dynamics is surrounded by means-layers which serve it in expressing and executing the impulses. The layer of perception and verbalization is the one farthest removed from the central core. It has an autonomous synthetic function of its own, which is the one affected in aphasic and agnosic disorders. The perceptual material synthetically integrated by this means-layer of the psyche serves as raw material for the apperceptive means-layer, which integrates it on another level establishing the object relationships of the percepts. This integrative, synthetic function is the one affected in Meynert's amentia. The material thus integrated in turn serves as the raw material of another means-layer of the psyche which integrates and evaluates it conceptually. This is the synthetic function affected in dementia. The process of final, personal integration in terms of drives—

operating by methods we would call the mechanisms of the primary process—is laid bare in dream-work, in neurotic symptoms and schizophrenic thought-disorders. Everywhere the pattern of the thought-disorder is the same, but its substratum in each disorder is a different one of these means-layers (14a). This conception, however vulnerable, and in parts outdated by more recent explorations, contains factual discoveries and theoretical assumptions which have only recently been approximated by psycho-analytic ego-psychology, through the studies of Nunberg (15), Hartmann, Kris, and Loewenstein (16, 17). It implies the assumption of ego apparatuses which have a relative autonomy and serve drive dynamics as an integral apparatus (18). It implies the recognition of synthetic functions layered over each other in a hierarchic series. It implies also the recognition that the secondary process is not as a whole juxtaposed to the primary process, but that there is a whole series of levels on each of which derivative motivations, progressively further removed from the basic drive, bring about primary-process-like phenomena, counteracted or replaced by more and more successfully socialized and reality-adapted secondary-process phenomena (19, 20). To show more concretely Schilder's insight, let me present to you his discussion of the relation of common slips of the tongue to the parapraxes of aphasics. We all remember Freud's discussion of the nature of parapraxes: he explained that when, robbed of my pocketbook in a dark street, I complain to the police that darkness robbed me of my money, I am mistaken, because darkness provided only the occasion for the robbery. Similarly—he continued—we are mistaken when we attribute slips of the tongue to fatigue, which gives only the occasion for impulses to break through in the form of slips of the tongue (21). In discussing aphasic parapraxes Schilder shows that they are not specifically related to repressed impulses as are our common slips of the tongue. The synthetic function inherent in the process of verbalization is itself affected in aphasia by an organic damage, and therefore the parapraxes are diffuse and not impulse-specific. Yet we know that when an aphasic becomes excited his parapraxes also become more pronounced and specific, even though the disorder is otherwise diffuse. In turn, with normal people the more fatigue and other general factors interfere with the effectiveness of the synthetic function of verbalization, the more occasion is given for the impulse to do its slip-producing work. Indeed the relationship between diffuse thought-disorder and specific impulse interference with autonomous psychic apparatuses is nowhere in our literature presented with the lucidity of Schilder's discussion (22). Not even in the Silberer-Jones controversy (23), which had the same core, did it attain such clarity. Silberer (24) claimed that the hypnagogic state by its very nature, owing to its low energy level, is conducive to symbolization, while Jones (25) nsisted that only repressed impulses are symbol-producing. Whatever the final fate of Schilder's theoretical construction may be, he did point out with unforgettable clarity the fact that thought-disorders do become diffuse and generalized, and it is rather the exception for them to be specific and traceable to single impulse dynamics, as are common slips of the tongue, and that there is a fluid transition between the dynamics of a diffuse and an impulse-specific thought-disorder.

Schilder, having recognized the fluid transition between the primary and secondary process, the multiple layering of synthetic and controlling energy distributions—which Hartmann, Kris and Loewenstein (26) recently described as the progressive neutralization or binding of drive cathexes—proceeded to create a conception of the thought-process in keeping with the conception of autonomous means-layers, or as recent psycho-analytic ego-psychology would put it: in keeping with the conception of autonomous ego-apparatuses (27). I shall choose four salient points to sketch Schilder's conception.

III

To outline Schilder's view of the thought-process, I shall attempt to sketch his conception of the motivation of thought-processes, of the nature of concepts, of anticipations, and of judgement.

Motivations. Our task would be easy if Schilder had anywhere directly expressed himself concerning the nature of the motivating forces of the thought-process, but it would be quite unlike him to have done so. We must not forget that, though a man of insatiable thirst for facts and unceasing urge to make sense of these facts by hunch and theory, Schilder was not a systematizer. There can be no question that instincts, drives, and libido were to his mind the ultimate motivators of psychic events.

There can be no question but that he was aware of their role at every point of the way. But when it came to the motivations of thought-processes we hear him talk about tasks, goals, determining tendencies, readiness, attitudes (*Einstellungen*), intentions, interests, strivings, affects, drive-orientations instead of drives. In other words, as soon as he began to talk about motivations of thought-processes other than the pure primary thought-process, his terminology was other than that of libido, drive, or instinct. This much is obvious to anyone who studies his writings. From here on it takes work—at times arduous work—to discover what he means. One has to wander from his *Brain and Personality* (28) to the *Studies Concerning the Psychology and Symptomatology of General Paresis* (14), and from there to his *Mind: Perception and Thought* (29), and painstakingly piece together Schilder's concept that the motivations of thought form a hierarchy, all deriving from the fundamental drives, all having an autonomy, that is capable of exerting their motivating role, once they are stimulated either by more fundamental motivations or by perceptions from the external world. Thus, not only do the means-layers of the psyche have a hierarchy, but so do the motivations of thought. This conception may remind one of the more recent—or let us say Neo-Freudian —conceptions, in which defensive structures and the energies related to them are considered to be basic motivations of human behaviour, as in Horney and Fromm. The difference is only that Schilder never forgets, or lets us forget, that higher level motivations derive from the more fundamental ones, even though he remains keenly aware of the relative autonomy of the former (30).

Schilder conceived of the role of motivations in thinking as follows. An impulse—which to begin with implies an object directedness—is checked (or as Freud would have put it: delayed in discharge), either by another impulse or by structural characteristics of the psyche. Such checking, braking-effect, or delay, gives rise to thought which in itself is both an indicator of the lack of fulfilment of the impulse and a carrier of the undischarged tension. Thoughts so arising develop from an indistinct, imageless, and wordless form into more distinct image-like and verbal forms, by being again and again modified by other similarly developing thoughts and structural obstacles. Thus thoughts, being resultants of both impulses and of delaying influences, they express not only the original impulse and its object, but also these intrapsychic and the objective delaying influences, and become progressively more reality-adapted, point the way to the object in reality, and thus fulfil the original aim of the impulse (31). What is not fulfilled by the diffuse, imageless thought is fulfilled by the discrete image, what is not fulfilled by the discrete image comes closer to fulfilment by the process of verbalization, and what is not fulfilled even by the verbalized thought is experienced by us as meaning; and this final residue points directly to the object of the impulse and cannot be fulfilled except by the action on the object towards which the impulse was originally directed (32). Thus Schilder carried a long way further what Freud sensed and expressed when he wrote: thought is experimental action with small quantities of energy (33).

Concepts (34). This still was not specific enough for Schilder; he was not satisfied with the realization that the process of thought can be initiated by motivations from any level of the motivational hierarchy either by intrapsychic or external perceptions, nor by the implied recognition of the relative autonomy of the levels of motivation. He seems to have reasoned: if thought leading to action can be initiated on any of the autonomous levels of motivation, then thought itself must also have relatively autonomous building-stones (35). These he found first of all in concepts. He was aware that ethnopsychology argues that primitive concepts are action-concepts, that is, for a dog trained to jump up on a chair the verbal signal ' chair ' means something to jump up and crouch down on, and anything that can be so acted on is subsumed under the primitive concept ' chair '. In one word he was aware that primitive concepts refer to things-of-action (36). He maintained that in order to act one has to have stable objects. In a world of constant change, lacking stability, in a world of piecemeal perception without synthetic integration, no action (that is, intentional action) is possible. He was aware that this is one of the fundamental implications of obsessive and schizophrenic doubt, indecision, and inactivity. This then is where concepts come in: they extract out of the world of objects the most constant and reliable features, and provide thereby reliable orientations and objects for action. Indeed he insisted that concepts which guarantee us the stability of objects are in

essence but action-readinesses directed towards specific objects (37). Furthermore, he maintained that to be successful, action requires insight into object-relationships, and realized that effective concepts do indeed comprise such insight (38). He knew that concepts do not have to be given birth to again and again, every time they came up in our thinking, but once they come about they are at our disposal as ready-made parts, apparatuses of our thinking. They are an expression of and serve as a guarantee for the autonomy of the secondary process. He was also aware, however, that in the course of our thinking these concepts undergo progressive growth and remoulding; though they appear ready-made, relatively stable, even quite rigid in some people (for example, feeble-minded) (39), in others—and at certain times in most people—they can become fluid again. He saw that in creative thinking they are resolved at times even into complete fluidity, only to be reborn from a battle of Titans in an entirely new form, in that of new artistic or scientific invention. He knew that concepts have a constancy, an autonomy, but he knew also that this autonomy is only relative, and creative processes can dissolve it and rebuild it again more richly (40). He conceived of every concept as surrounded by a halo of connected associations which he termed ' the sphere ', and believed that it is in these spheres that motivations of any level find concepts to orient them towards finding their object in reality, and lead them to action and discharge on these objects; and also that it is within these spheres that concepts are remoulded in the course of intellectual growth as well as in the heat of creative invention (41).

Anticipations. But Schilder was not satisfied with inserting concepts and their spheres as autonomous apparatuses to explain the relation and transition between the primary and secondary process. He observed that motivations imply as expectancies the objects towards which they are directed. This expectancy begins even with the drive in the sense that drive discharge becomes possible only in the presence of its satisfying object (42). Freud showed this and Schilder never forgot it. He also learned from the experiments of Selz that in the course of thought-processes directed towards problem-solving, schematic expectations of the solution precede the solution itself (43). It is no surprise that Schilder knew Selz, who delivered one of the first decisive blows at conventional academic association psychology, for he knew this conventional psychology as well as *Gestalt* psychology and Lewin. Indeed with the exception of only a few psycho-analysts who are our contemporaries, he may be described as the psychiatrist most broadly versed in the psychological literature. For these expectations accompanying any and all motivation, he adapted from Selz the concept of anticipation-patterns. Thought does not develop merely from the clash of motivations or the delay of motivations by the structural hierarchy of the psychic apparatus, nor by these motivations using crystallized concepts to guide them to action, but motivations carry with them, to greater or lesser degree, structuralized anticipation-patterns which guide them in selecting the proper concepts (44). These anticipations, like concepts, are again, as it were, relatively autonomous apparatuses in the service of the thought-process. If we talk about selectiveness in memory, in perception, in thought, we are referring to the effect of these anticipations. It is clear from Schilder's writing that he was guided in his formulation of the role of anticipations by Bleuler's description of hysterical mechanisms as ' occasional apparatuses ', but it is also clear that he went far beyond Bleuler in perceiving the significance of such apparatuses (45). Again it is clear that though such anticipations may and do come about anew in creative as well as in everyday productive thinking, many of them, once crystallized, stay with us and guarantee the reality-adaptedness of the thought-process and the socially shared character of communication (46). For instance, if I now say the word ' although ', I have elicited in all of you the anticipation that I will follow this word ' although ' with two co-ordinate and antithetic sentences. Indeed all the conjunctions of the language are verbal expressions of such highly structuralized (automatized) and socially shared anticipations, which, as we know, do not exist in such primordial forms of thought as for instance the dream (47).

The conception of structuralization, automatization, of apparatuses implicit in Schilder's view of concepts and anticipations was explicitly and systematically put forth in 1937 by Hartmann (16). This conception proved in Hartmann's treatment to be an inevitable corner-stone in the systematic theory of psychoanalytic ego-psychology.

Judgement. Finally let me discuss Schilder's

concept of judgement. It is clear that both in his 'Formulations Regarding the Two Principles in Mental Functioning' and 'Negation' Freud had set the concept of judgement in the centre of the function of reality-testing; yet he left the formal characteristics of this function unexplored. Schilder studied the function in various thought-disorders and demonstrated that judgement, when functioning in relation to action, consists of a matching of the percept of the object to be acted on and the result of the action, with the anticipation and the concept of the object to which the motivation was directed. He also demonstrated that judgement, when functioning in relation to thought, consisted in a matching of the anticipation-pattern accompanying the motivation, with the memory associations of the sphere through which the thought-development had passed. In other words, passing through the various associations of the sphere, judgement matches the various associations met with by the anticipation-pattern implicit to the motivation (48).

These conceptions alone would seem to be important contributions. Yet Schilder went further. Merlan (49) and Bernfeld (50) recently reported evidence that Freud had studied with Brentano and was familiar with act-psychology and with the philosophy of phenomenology. Indeed those who did text-critical work on Freud's writings have been anticipating something like this, since traces suggestive of Brentano's influence are again and again encountered in Freud's writings (51). But here is the difference between Freud and Schilder. Freud digested whatever in Brentano and phenomenology fitted his purpose and his thinking. Schilder studied these and set out deliberately to apply their thinking to psychiatric research (52). Their thinking fitted in well with his great interest in describing pathological phenomena. Applying act-psychology to the issues of reality-testing led him to see that human thinking and consciousness is such that we are capable of having ideas in our consciousness as specific memories, as facts of general knowledge, as daydreams, as future expectations, as facts, as assumed, doubted, certain, etc. He showed that it is useful to subsume all these as form-varieties of the function of judgement, and that without these forms of conscious experience implied in judgement, the refinement of reality-testing, that is, the function of the reality-principle, would be altogether crude and far short of the stage it has reached (53). Schilder's awareness of these forms of conscious experience is so far-reaching that at times he gives the impression of assuming that these varieties of conscious experience generalize into autonomous states of consciousness, of which there again exists a broad, but hierarchically ordered, variety. To my mind, the understanding of the phenomena of transition between the waking and the dream state, and of many pathological conditions (for example, fugues, amnesias, schizophrenic blockings, etc.), is not possible without making some such assumption (54). But let me resist the temptation, so great at this point (55), which would lead me away from what are certainly Schilder's ideas, to where my own would inevitably, if imperceptibly, creep in.

IV

Now that I have attempted to sketch the nature of Schilder's contribution to the theory of thinking, I feel I have delayed long enough in presenting Schilder's two fundamental points of departure, which he held with an intensity amounting to articles of faith, and the validity of which he endeavoured to demonstrate in multifarious ways. These two fundamental premises are:

First: human thinking is directed toward an existing world of objects, and without assuming the existence of such a world of objects, no theory of thinking can be built (56). Clearly this is an epistemological stand, and you may wonder why psychiatrists should be bored with the tedious nonsense of philosophizing, and you may ask who anyhow would doubt such a simple fact. Yet the thinkers of Western civilization, from Heraclitus to Schopenhauer, have struggled for 2,500 years with this issue and offered many contradictory solutions to it. In psycho-analytic writing also there has been a good deal of confusion about it (57). When thinking is considered only in its motivated aspects, and not in its reality-adaptive and socialized aspects as well, what we perceive may indeed appear as mere projection of the objects of our motivation. Schilder insisted early, just as did Freud in his last writings (58), that human psychic life is not a product of conflicts only. It is Hartmann's (16) merit to have formulated this issue systematically: we are born with apparatuses—those of memory, perception, musculature, etc.—which exist before the ego and id have become differentiated, and which are integrated after this differentiation

into the ego, and then subserve its functions. Hartmann realized that these inherited apparatuses potentially guarantee reality-adaptation—providing that maturation and integration take place relatively unhampered. Schilder stated his epistemological stand as early as 1923 (35), and though never advanced to the level of the formulations of Hartmann, the spirit of this epistemological stand permeated all his writings. Projection is indeed a fundamental corollary of the basic motivated nature of thought, and without projection and introjection the formation of the ego, the differentiation of the 'me' and the 'not-me' is hardly conceivable to those who grew up on Freud's 'Metapsychological Supplement to the Theory of Dreams' (51), and *Beyond the Pleasure Principle* (59). Yet neither projection nor introjection are conceivable without the perceptual and motor apparatuses, these preformed and inherited guarantees of human adaptation. Reality-adaptation is not a late acquisition in man's ontogenesis: it is also his fundamental inherited potentiality, though its unfolding occurs in the course of ontogenesis, and is contingent upon the conditions and conflicts of ontogenesis (60). Schilder was right, and present-day psycho-analytic ego-psychology came to the same conclusion: without this postulate, psychological life is not understandable. If an illusion to the contrary could be sustained in any other area of psychology, a consistent attempt at building a theory of thinking would certainly break such an illusion to bits.

The *second* basic premise of Schilder was that socialization, just like reality-directedness, is not an acquisition of thinking or human psychological life, but a basic implication of it (61). He endeavoured to demonstrate this on drive actions and expressive movements, showing that these forms of behaviour are already directed to an audience, are communications. He linked language to expressive movements, tracing thus its fundamentally socialized character (62). He stressed that the very motivations of thought and the corresponding anticipations and concepts imply, to begin with, the socialized character of man, and though experience, learning, and the corresponding development of the higher levels of motivation, anticipation, and conceptual abstraction lead to more and more adequate reality and socially shared (socialized) forms of thought, socialization is not just acquired but lies in the very nature of human psychic organization. Here again Schilder did not break the continuity between drive and primary process on the one hand, and experience, learning, cultural influence, socialization and secondary process on the other, but rather insisted that there is a continuous development from the one to the other, and that socialization and secondary process cannot be understood without realizing the basically, even if only potentially, socialized implications of the fundamental motivations, and of the thought-forms of the primary process that pertain to them. Though deeply interested in all the matters so dear to the heart of the present-day, so-called culturalist, schools of psycho-analysis, he could not afford to forget the fundamental motivations in favour of the higher level, defensive and adaptive motivations to which these schools resorted as ultimate explanatory principles of behaviour.

It is curious to see how the environmentalist and culturalist thinking pushes *learning* into the foreground of psychological interest, and how it is inclined to accept conditioned-reflex and conditioned-response theories of learning. Schilder, however, though he was fully cognizant of and deeply interested in conditioning, saw and stated clearly the fallacy of such a procedure (63). He argued: though we see complex motor mechanisms built up on simple reflex mechanisms, it would be a mistake here, as elsewhere, to start with the analysis of the simplest forms. Obviously he had Coghill and Minkowsky in mind. The simple reflex mechanisms are crystallizations of previous global and undifferentiated processes. So do habits automatize into relatively stable occasional apparatuses from undifferentiated flexible and goal-seeking processes (64). The understanding of habits becomes, therefore, possible only on the basis of an understanding of those automatization processes, which are the fate of many complex psychological dynamisms. This is a crucial point which has in academic psychology been most clearly perceived by Kurt Lewin (65), and in psycho-analytic ego-psychology by Heinz Hartmann (16).

The two points of departure of Schilder's psychiatric thinking in general, and of his theory of thinking in particular, are the belief in the basic directedness of all psychological processes towards objects of an existing reality, and the belief in the basically socialized character of the human psychic apparatus—which matures in the course of experience and learning, but is not created by them.

V

Schilder is the ' Minister without Portfolio ', and the Minister without Portfolio is supposed to tell us about what all the rest are doing. Let us then ask: What does he tell us about all the rest?

As you can see from the scattered comments I have made about Freud's theory of thinking, Freud centred on the issue of the fundamental motivation of thought, and though he opened up the problems of the theory of thinking in many directions beyond this fundamental interest, he had to pay for his systematic singleness of purpose by doing little about the exploration of the many avenues he opened into the study of the adaptive and socialized nature of thought. On the other hand, we see how the interest in adaptation, culture, societal influences, results in centering much of contemporary psycho-analytic interest upon defences, values, socialization, and learning, and we know how the psycho-analysts so interested—for instance, Horney, Fromm and Sullivan—pay for this interest. They lose contact with, and in fact have to turn forcibly against, what we have learned of the basically motivated nature of man's behaviour and thought.

I am sure you are by now asking yourself, ' Was Schilder the only man who did not pay anything, since he could see all of it? " This is certainly not the impression I would want to give you. This encyclopædic mind, this psychiatric polyhistor of our time, paid dearly for his discarding the claim to any portfolio. He never developed systematically any of the infinitely rich observations and countless hunches he developed in well-nigh all fields of psychiatric interest. Unresting and fruitful, he spread his effort all around, sowing rich seed without being interested in a definitive harvest. And so it happens that the full scope of his contribution has been hardly assessed, that his writing is often so difficult to read, and that I find myself here talking to you about his theory of thinking.

So it is in the development of science. For every achievement we pay dearly by turning away and indeed cutting ourselves away from other possibilities and facts. No individual and no school can encompass the riches of phenomena in any science, and even less so in the science of man, with which we are concerned. I believe the ' Minister without Portfolio ' tells us that none of us can behold all aspects of man at once, and the one who attempts to do that will give a rich and intuitive but scattered picture. He makes it easier for us to understand why, in exploring cultural influence in personality development, one is prone to forget basic motivation by showing us that a high price has to be paid, by every one of us, for what we would discover.

This price is determined by what our interest centres on, and our interest in turn flows from our character and personal proclivities. It is a different person with partly different values who is possessed with the discovery of basic motivation, from the one who finds defensive and socializing motives to be the ultimate ones. So with Schilder too: personal proclivities, values, and urges, determined ultimately the choice of the price he paid. Let us, however, not ask what the personal proclivities of Schilder were that shaped the character of his scientific creativity, but let us rather honour the man, so rare in our time, who sowed seeds richly and was little concerned with the harvest.

BIBLIOGRAPHY

(1) Cf. RAPAPORT, D. (1950). ' On the Psycho-Analytic Theory of Thinking ', *Int. J. Psycho-Anal.*, **31.**

(2) FREUD, S. ' The Interpretation of Dreams ', in: *Basic Writings.* New York: Modern Library, 1938.

(3) —— ' Wit and its Relation to the Unconscious ', in: *Basic Writings.* New York: Modern Library, 1938.

(4) —— ' Formulations Regarding the Two Principles in Mental Functioning'. *Ibid.*

(5) —— ' Repression '. *Ibid.*

(6) —— ' The Unconscious '. *Ibid.*

(7) —— ' Negation ', in: *Collected Papers*, **5.** London: Hogarth Press, 1950.

(8) See (2), pp. 466–467.

(9) RAPAPORT, D. (1951). *Organization and Pathology of Thought.* New York: Columbia University Press, pp. 786.

(10) See (2), p. 536.

(11) SCHILDER, P. See in (9), ' On the Development of Thoughts '.

(12) SCHAFER, R. (1945). ' A Study of Thought-Processes in a Word-Association Test ', *Character and Personality*, **13.**

(13) STEKEL, W. See in (9), ' The Polyphony of Thought '.

(14) SCHILDER, P. (1930). *Studien zur Psychologie und Symptomatologie der progressiven Paralyse.* Berlin: Karger. See also in (9), ' Studies

Concerning the Psychology and Symptomatology of General Paresis'.

(14a) See (14), in (9), pp. 566–568, 577–580. See also (27), pp. 223–232.

(15) NUNBERG, H. (1948). 'The Synthetic Function of the Ego', in: *Practice and Theory of Psychoanalysis*. New York: Nervous and Mental Disease Publication.

(16) HARTMANN, H. (1939). 'Ich-Psychologie und Anpassungsproblem', *Int. Z. Psa. u. Imago*, **24.** See also in (9), *Ego Psychology and the Problem of Adaptation.*

(17) HARTMANN, H., KRIS, E., and LOEWENSTEIN, R (1946). 'Comments on the Formation of the Psychic Structure', in: *The Psychoanalytic Study of the Child*, **2.** New York: Int. Universities Press.

(18) Compare RAPAPORT, D. 'The Autonomy of the Ego', *The Menninger Bulletin*, July, 1951.

(19) Compare KRIS, E. 'On Preconscious Mental Processes', *Psychoanalytic Quart*, **19.** See also in (9), 'On Preconscious Mental Processes'.

(20) Compare RAPAPORT, D. 'Toward a Theory of Thinking', in (9), Part VII.

(21) FREUD, S. (1938). 'Psychopathology of Everyday Life', in: *Basic Writings*. New York: Modern Library, esp. p. 50.

(22) See also (14), in (9), pp. 565–566.

(23) See NACHMANSOHN, M. 'Concerning Experimentally Produced Dreams', in (9); esp. pp. 283–284.

(24) SILBERER, H. (1912). 'Über die Symbolbildung', *Jhb. Psa. Psychopath. Forsch.*, **3.** See also in (9), *On Symbol-Formation.*

(25) JONES, E. (1948). 'The Theory of Symbolism', in: *Papers on Psychoanalysis*, 5th ed. Baltimore: Williams and Wilkins.

(26) HARTMANN, H., KRIS, E., and LOEWENSTEIN, R. (1949). 'Notes on the Theory of Aggression', in: *The Psychoanalytic Study of the Child*, **3–4.** New York: Int. Universities Press.

(27) SCHILDER, P. (1924). *Medizinische Psychologie.* Berlin: Springer. 'Even when treating of the drive psychology of thinking, we must remain aware that there are structures involved in thinking which cannot be explained by genetic constructions: I mean the very existence of images, thought and judgements. Furthermore though affects and drives play a most significant role in perception, perception has a core independent of drive dynamics' (pp. 194–95). 'It must not be forgotten that the schemata and other apparatuses of thinking are to be considered as given in their constitution and independent of drive and affectivity: thus a complex response will often arise in the form of an actualized knowledge as a whole . . . complex completion and task direction in thinking are such apparatuses' (p. 205).

(28) SCHILDER, P. (1931). *Brain and Personality.* New York: Nerv. and Mental Disease Publication.

(29) —— (1942). *Mind: Perception and Thought in Their Constructive Aspects.* New York: Columbia University Press.

(30) See (27). 'If drive satisfaction could occur without knowledge, knowledge would never arise: there would be no energy available for it' (p. 199).

(31) Compare (27). 'The sphere is wherever new relationship-experiences are born; here drive-like strivings are curbed—delayed—by counter-strivings. Thus ever new images come about and each of these enters into relations with the others. This curbing makes the richness of thinking possible' (p. 202).

(32) See (14), in (9), pp. 528–30.

(33) See (4), p. 16.

(34) See (14), in (9), pp. 528–29; also (27), pp. 91 ff; pp. 232 ff; and (11), pp. 515–18.

(35) SCHILDER, P. (1923). *Seele und Leben.* Berlin: Springer.

(36) Compare WERNER, H. (1940). *Comparative Psychology of Mental Development.* New York: Harper.

(37) See (14), in (9), p. 529.

(38) *Ibid.*, pp. 522–4.

(39) *Ibid.*, pp. 562 ff.

(40) See (27), pp. 284–5.

(41) See (11), pp. 515–8; also (27), pp. 200 ff.

(42) See (27), p. 198 and p. 202.

(43) See (14), in (9), pp. 537–9.

(44) See (11), pp. 507–9; also (29), pp. 324–5, p. 271; also (14), in (9), pp. 532–7; also (27), pp. 205–6.

(45) See (28), pp. 68–70; also (27), pp. 225–6; cf. also (16), in (9), pp. 392–6.

(46) SCHILDER, P. (1918). *Wahn und Erkenntnis.* Berlin: Springer, pp. 45 ff.; also (27), pp. 284–5.

(47) See (29), p. 261.

(48) See (14), in (9), pp. 532–7; see also (27), pp. 198–208.

(49) MERLAN, P. (1945, 1949). 'Brentano and Freud', *Journal of History of Ideas*, **6, 10.**

(50) BERNFELD, S. (April, 1951). 'Turning Points in Freud's Life', Lecture at Yale University, Department of Neuropsychiatry.

(51) See particularly FREUD, S. (1925). 'Metapsychological Supplement to the Theory of Dreams', in: *Collected Papers*, **4.** London: Hogarth Press.

(52) See SCHILDER, P. (1914). *Selbstbewusstsein und Persönlichkeitsbewusstsein.* Berlin: Springer. See also (35).

(53) See, e.g. (27), pp. 209–10.

(54) See, e.g. (27), pp. 74 ff., and pp. 223 ff.; and (28), pp. 11–13.

(55) Compare RAPAPORT, D. (1951). 'A Psychodynamic View of States of Consciousness', in: *Problems of Consciousness*, Proceedings of the Josiah Macy, Jr., Foundation Conference, ed. H. Abramson, New York.

(56) See, e.g. (27), p. 202 and (14), in (9), pp. 519–27.

(57) HERMANN, I. (1929). *Das Ich und das Denken.* Vienna: Int. Psa. Verlag, 1929. See also: *Psychoanalyse und Logik.* Vienna: Int. Psa. Verlag, 1924.

(58) FREUD, S. (1936). *The Problem of Anxiety.* New York: Psa. Quart. Press. See also: 'Analysis Terminable and Interminable', *Int. J. Psycho-Anal.*, **18,** 1938, and *Collected Papers*, **5,** 1950.

(59) —— (1922). *Beyond the Pleasure Principle.* London: Int. Psa. Press.

(60) Compare HARTMANN, H. (1948). 'Comments on the Psychoanalytic Theory of Instinctual Drives', *Psa. Quart.*, **17.**

(61) See, e.g. SCHILDER, P. (1942). *Mind: Perception and Thought in Their Constructive Aspects.* New York: Columbia University Press. 'The body image as well as the object are built by continuous interchange with other human beings; they are therefore socialized. Socialization is thus the fundamental form of human experience' (p. 244). See also *op. cit.*, p. 261. Compare also PIAGET, J. *Principal Factors Determining Intellectual Evolution from Childhood to Adult Life* in (9).

(62) See (14), in (9), pp. 524 ff.

(63) See (27), pp. 73 ff.

(64) See (28), pp. 65–71.

(65) See LEWIN, K. *Intention, Will and Need,* in (9), esp. pp. 129–130, 141–3.

(Received 15 May, 1951.)

PAVOR NOCTURNUS

By MAX M. STERN, M.D., New York

The problem of neurosis is the problem of anxiety. It is all the more remarkable that pavor nocturnus, which is one of the most striking manifestations of anxiety in human life, has been treated with some neglect in the literature. The anxiety experienced in pavor nocturnus—especially in its fully developed form, the nightmare—has been described as an agonizing experience of almost unimaginable intensity. 'Imagination cannot conceive the horrors and the incomprehensible dread of this experience' (Jones, 8). It rocks the foundations of psychic existence; it undermines the narcissistic belief in the permanence of one's own physical existence, and the confidence in the constancy of reality which is indispensable if capacity for action is to be maintained.

The tendency to repress the traumatic experience inherent in pavor nocturnus—a kind of retrograde amnesia—explains the meagreness of the patient's description, which is in striking contrast to the intensity of the anxiety he obviously has experienced. This repressive tendency corresponds to a similar attitude in the analyst: pavor nocturnus frequently tends to be overlooked. Yet pavor nocturnus is a universal and typical experience. This paper is based on the contention that it plays a central rôle in the psychic life. In children it represents the infantile trauma, which according to our clinical experience encompasses the triad of infantile masturbation, primal scene and pavor nocturnus.

In the literature, no uniformity of opinion exists either as to the nature of the phenomenon or as to terminology. The use of the terms *pavor nocturnus*, *anxiety dream*, *anxiety attack*, *nightmare*, varies, both as concerns their meaning and their applicability to children or adults. Observation and description are often confined to only a part of the pavor nocturnus complex; for example, only to that part of the reaction which can be observed objectively, that is the sleeper's awakening in fright.

In one of his early works, Freud (4) termed pavor nocturnus a *variety of the anxiety attack*. He distinguished the 'pavor nocturnus of adults, *a nocturnal awakening in fright* (usually combined with anxiety, dyspnœa and sweating)' from the pavor nocturnus of children; the latter 'receiving its specific character from the hysterical tinge, i.e. the coupling of anxiety with the reproduction of some appropriate experience or dream'. Elsewhere (5), he calls pavor nocturnus *a nocturnal anxiety attack with hallucinations*, citing a case of pavor nocturnus in a thirteen-year-old boy whose sleep was interrupted by severe attacks of anxiety accompanied by hallucinations: 'he would wake up from an anxiety dream in terror, unable to cry out at first, until his voice came back to him and he was distinctly heard to say, 'No, no, not me!'

Jones, in his fundamental work *The Nightmare* (8), limits his investigation to the nightmare in adults and defines nightmare as a distressing dream necessarily showing, amongst other features, three cardinal ones: 1. Agonizing dread, 2. Sense of oppression or weight at the chest which alarmingly interferes with respiration, 3. Conviction of helpless paralysis.

J. Waelder (20) applies the term pavor nocturnus predominantly to the part of the reaction which can be objectively observed, the abrupt awakening with screams. According to her, pavor nocturnus occurs only in children.

H. Deutsch (3) calls pavor nocturnus an attack of waking up from sleep with screams of fear; nightmare, a sensation of being unable to move. The immobility is a consequence of the fact that the motor tendency has taken on the sexual motor elements of an interrupted sexual act (masturbation), which is inhibited owing to the threat of punishment.

Schonberger (16) considers nightmare an anxiety dream and treats the various elements of the phenomenon as parts of a phantasy which constitutes a dream; the respiration difficulty and sensation of weight on the chest being interpreted as autopunitive reactions to

oral-sadistic wishes, the paralysis or immobility as a death-imitation reaction: 'a talionic punishment for the phantasy of killing'.

The Phenomenology of Pavor Nocturnus

The pavor nocturnus attacks may occur during sleep at night, in the morning, or in the afternoon. They are most frequent at the point of transition from half-sleep to deep sleep or, conversely, from deep sleep to half-sleep.

It seems certain that pavor nocturnus is always preceded by a dream, even when the patient does not remember it; the stronger and more threatening the predominant sensations of the attack, the weaker the recollection of the dream. The dream always contains some typical elements having reference to motility, such as running, climbing, gliding, falling, etc. In addition, we often encounter scoptophilic and exhibitionistic phantasies. The frequency of oral elements is striking; they often are specifically represented in the anxiety accompanying the subsequent attack: fears of being eaten, of being unable to scream, etc. Auditive elements—hearing noises, etc.—are also of particular importance.

In the further development the dream changes into an anxiety dream characterized by threat. The danger may assume the most diverse forms. It may refer to the sleeper's body: crashing down from heights, bursting, suffocating, etc. Or it may come from the sleeper's environment; be it from human beings, as in the persecution dream; or from animals, ghosts, vampires, etc.; or from inanimate objects: walls, houses crumbling over him, waves engulfing him, earthquakes shaking the entire world. Invariably he is helpless against the threat, which is nearly always connected with the most severe anxiety.

As the dreamer's helplessness against the threat increases, it assumes more and more the character of paralysis. As the danger grows, so the paralysis rapidly becomes predominant. He seeks to escape, but in vain: he cannot move. More and more, the sensation of paralysis spreads to other vital functions of the body.

At a certain point the sensations of paralysis begin to take on the character of reality, although still remaining in some way hallucinatorily connected with the preceding dream content. At this point the danger, which was previously hallucinated in the dream, becomes a real, deadly danger. He feels an inability to breathe, with a sensation of dreadful pressure on the chest, similar to the precordial fear of annihilation; a sensation as though a band of iron were encircling his head; a feeling of being overwhelmed by unconsciousness. Now he is convinced that he is no longer dreaming, that he really is in utmost peril. He knows that he would be able to save himself from this peril by waking up; but he cannot wake up, and with each passing moment feels the real end coming closer. He wants to scream, to call for help, but he is unable to utter a sound. By movements of his body and limbs, he seeks to shake off this thrall which paralyses him and leaves him a helpless prey to this overwhelming physical danger. But his desperate efforts at escape are without avail—until suddenly, with some violent movement, he awakes to reality. Covered with perspiration, his heart racing madly, he feels he has escaped from a mortal danger.

As we have seen, from a certain moment on we can no longer speak of a dream. An element of reality, which had already been influencing the dream before, begins to dominate the situation; it is represented by somatic sensations of paralysis of vital functions—motility, circulation, respiration. At this moment, the person has become awake to the experience of his bodily sensations. It is a partial awakening: he is no longer asleep, yet he cannot wake up. It is an intermediate state between waking and sleeping: he can neither control motility, nor is he able consciously to receive and interpret perceptions; as yet, he has no relation to reality. The awakening mechanism is paralysed,

The process which has been described here can reach various degrees. At each point in its progress it may be interrupted and replaced by full awakening.

The analysis of dreams leading to pavor nocturnus will be discussed in a later paper, in which I shall deal extensively with the clinical aspects. Therefore only two typical examples are given here:

(1) I only remember vaguely that I was lying on the bed. A brother is there. A strange force slowly lifts me into the air; stretched out and rigid, I begin to float. Then, stiff and straight, I fall—not on the bed, but beside it. I want to get up. I can't move. I want to scream, to call to my brother, who was there somehow, 'Help, help, I have gone mad.' (In German: *verrückt* = displaced.) I feel as if I were rigid and dead. I know that if I don't wake up now, it is all over. I cannot breathe, cannot move, as though my ribs were

being crushed. It is as though my head were bursting, something is pressing on my head, more and more. I make violent, desperate attempts to move my body and throw off the spell. I cannot. Suddenly, I wake up with a jolt. But it was not at all like a dream. It was real, like an hallucination: something real going on.

(2) I am sitting in a café with my wife and a man. We are eating. A beggar approaches us. Jane gives him some money from her pocket-book. Another beggar comes and accosts me. I want to take money out of my pockets. Jane asks: 'What do you want to give him?' *The bum comes closer, grasps my testicles.* I try to scream. *He chokes my throat.* I cannot scream. I hope they will pull him away from me, but *he bears down upon me more and more violently.* I try to shake him off. I can't. I am paralysed. Suddenly, I shake him off and wake up.

The element of paralysis constitutes the core of the pavor nocturnus, which thus may be defined as an anxiety state under the condition of sleep, characterized by sensations of progressive paralysis affecting motility as well as the vital functions of respiration and circulation. It is accompanied by objective symptoms, such as outbreaks of cold sweat, violent palpitations of the heart, etc. Subjectively the experience is dominated by the fear of dying, together with the simultaneous knowledge that full awakening can terminate the danger. The paralysis culminates in the fully developed attack in the inability to wake up, imparting the uncanny sensation of utter helplessness to the entire process.

In the literature the sensations of paralysis have been variously interpreted: as symbolic dream manifestations, as talionic punishment, as extension of an inhibited sexual act to the whole motor system, as repetition of unpleasant experiences, etc. Are these sensations purely dream hallucinations; i.e. parts of phantasies, which in the way peculiar to the dream work have been displaced into the present and are being expressed pictorially? Or are they expressions of real, somatic processes? From the objective observations, especially on children, as well as from the subjective accounts it is hardly in doubt that these sensations have at least a somatic basis.

Freud's demand that all our provisional formulations in psychology will some day have to be based upon an organic foundation, justifies a digression into biology. I should, therefore, like to compare pavor nocturnus with a condition in which anxiety causes progressive paralysis of vital, somatic functions; i.e. with primary shock, or neurogenic shock of central origin. In a partial complex of the shock reaction, which I have termed the *catatonoid*[1] *reaction*, we find a condition which contains the features characteristic of the pavor nocturnus state.

Anxiety and Shock

In a study which is to be published shortly (18), I have discussed the relation between anxiety and shock. A summary is given here:

Shock—or, to be more precise, the primary shock or neurogenic shock of central origin (Moon, 11; Davis, 2)—is a condition of severe organic disturbance, which is caused by over-intensified psychic activity and often leads to death. Modern authors consider the essential nature of shock to be circulatory failure. According to Selye and his co-workers, stress, be it from psychic or physical sources, produces: 1. The shock reaction (an impairment of the internal environment), and 2. The homoeostatic response, or shock defence, which consists mainly in increased activity of the adrenal sympathetic system, especially the cortical hormone (ACTH). We therefore define shock as the consequence of a failure of the homoeostatic response in the stress reaction. As death by shock comes about through the same mechanism by which vital functions finally cease in death from so-called natural causes, we agree with Moon that 'shock is merely the approach of death by the usual mechanism' (11).

If anxiety is a response to a traumatic event, i.e. to a state of tense excitation which cannot be mastered through discharge (Freud), it follows that shock, a reaction to excessive psychic stimuli, represents the sum of the processes that occur on the somatic level whenever a traumatic factor emerges on the psychic level.

The intensification of circulatory and respiratory activity and the increase of muscular tension, frequently thought of as the physical activity underlying the anxiety complex, in reality belong to the second phase of the physiological anxiety complex and are to be understood as defence against the paralysing, shock-like reaction which represents the first phase. Only the shock complex proper, i.e. the shock

[1] A term suggested by Ernest Jones, in a personal communication to the author.

response plus the defence reaction, constitutes the sum of the somatic processes which underlie the psychological experience of the anxiety complex. Anxiety—the response in the traumatic situation—includes, so to speak, both dying and the defence against dying. The danger represented in the traumatic event is that of being overwhelmed or annihilated by shock. For reasons of functional economy this catastrophic response, primal anxiety, is replaced in the mature organism by a warning signal: common anxiety or, as Freud calls it, signal anxiety, an attenuated reproduction of a previous traumatic situation, by means of anticipation.

Observations of the behaviour of children during the post-natal period permit the assumption that the previous traumatic experiences which are, later, to be reproduced in an attenuated form in common anxiety, are more or less severe shock reactions that are physiological in this early period, due to the immaturity of the infant's organism. 'Physiological shock is potential in all babies' (Ribble, 14). Phenomena of infantile motility of this period—such as mass activity, startle pattern, rage, temper tantrums—are involuntary, reflex-like mechanisms of discharge and constitute defence reactions against shock.

We may therefore widen Freud's definition of anxiety as follows: The previous traumatic situation, which is reproduced in the anxiety signal, is the shock complex of the early-infantile period. The traumatic event, a disturbance of the economy caused by a situation in which the amounts of stimuli have reached an unpleasurable level without being mastered psychically, *is a danger situation* per se, *because of the physiological mechanism of the shock reaction which throughout life becomes operative whenever excessive quantities of stimuli remain undischarged or other factors cause a disturbance of the homoeostatic equilibrium that cannot be corrected by the usual mechanisms.*

What characterizes anxiety in the maturer organism is the anticipation of the danger of being overwhelmed and annihilated while at the same time this actually begins to happen in a certain degree, albeit in a very attenuated form, i.e. as a warning signal. But since more or less threatening shock experiences were once experienced in reality, the anxiety process includes a realistic element progressively gaining in strength. These two factors—real threat of annihilation, and the progressively rising increase of the danger itself—impart their distinctive character to the psycho-physiological affect of anxiety.

Instead of assuming the anxiety phenomenon to be always equal in character, we must consider the possibility that anxiety processes may be variable, owing to variations in the underlying somatic process; e.g. according to the degree in which a shock reaction prevailed over shock defence in the primal anxiety.

The Catatonoid Reaction

For our present purposes we are interested in the closer examination of a particular phase in the shock complex, the *catatonoid reaction.* This reaction encompasses a number of symptoms bearing a resemblance to the catatonic syndrome, first described by Kahlbaum; namely, stupor, rigidity or immobility, and vegetative disorders (difficulties of the circulatory and respiratory systems, intestinal troubles), sometimes interspersed with brusque impulsions. It corresponds to the reaction of dead faint in animals, a kind of catatonic stupor known as fright rigidity (*Schreckstarre*). It has been observed in infants as a reaction to frustration. In the early-infantile period, frustrations—such as loss of mothering, delayed sucking, etc.—are responded to by three different forms of primitive stress reactions, which may follow one another, according to the degree of frustration: 1. A reaction of *excitation*: increased discharge, restlessness, crying, vigorous body movements, muscular tensions, erection of penis; 2. A reactive depression of vital functions: the *catatonoid reaction*, consisting of refusal to suck, hypertension and rigidity of all body muscles with an extensor reaction of the muscles of the back, breathing difficulties, constipation, periods of violence, screaming (negativistic phase: Ribble, 14, 15); finally culminating in 3. *Full shock*: with stupor, general loss of muscle tone and of reflex excitability throughout the body, pallor, gastro-intestinal disturbances (diarrhœa), and death.[2] Thus the catatonoid reaction—being the precursor of shock, the most serious reaction to frustration—functions as a last line of defence against shock.

[2] Jones (9) divides the numerous symptoms of anxiety into two classes, those of over-excitation and those of inhibition, corresponding to two biological defences: the reaction of flight and that of pseudo-paralysis.

The catatonoid reaction seems to result from a blocking of higher cortical centres, probably as a consequence of anoxia, and represents a biological regression to a more vegetative existence, a dedifferentiation of the organism (Goldstein). Some of its manifestations are reminiscent of the decerebrate rigidity observed in animals (Sherrington). It is highly significant that substances which were used experimentally to produce catatonia (adrenalin, acetylcholin, coli bacilli, etc.) have likewise been found effective for the experimental induction of shock. One need not go much further to see catatonia as the last phase in a long line of defences against shock (de Jong, 10; Baruk, 1).[3]

Like shock itself, the catatonoid reaction is a consequence of a relative failure of regular defence mechanisms, due to too sudden or too long an exposure to over-stimulation. This might be the biological determinant of the catatonoid reaction, wherever it occurs; especially, in catatonic states in psychosis. The psychotic symptoms would thus appear to be unadapted mechanisms of defence against overwhelming anxiety.

The fright reaction, an emergency defence-reaction against too sudden stimulation, is a transitory catatonic-stupor reaction, sometimes intermingled with outbreaks (panic), and is very soon followed by violent shock-defence reactions such as palpitations of the heart, heavy breathing, and vegetative sensations. Other phenomena, such as depersonalization, estrangement, may likewise be based upon this principle. Oberndorf (13) has defined depersonalization as defence which masks anxiety without diminishing its intensity, comparing it with fright rigidity: ' playing possum ' (simulation of death as a defence).

Pavor Nocturnus and Shock

We can now easily recognize that *pavor nocturnus is a catatonoid reaction under the condition of sleep, more or less intermingled with reactions pertaining to shock.*

The similarity of the nightmare syndrome to catatonia has been stressed by Baruk: After recovering from catatonia, patients described the condition as like being overcome by a heavy and invincible sleepiness accompanied by violent nightmares. Gradually they had tried to react to the nightmare, and with the elements of the dream had built a veritable delirium which was the motivation of all their acts. They had the impression that their volition was paralysed, and experienced this as being overwhelmed by external forces; such as hypnotic influences, electric waves, etc. (1).

Having defined pavor nocturnus as a catatonoid reaction, we cannot consider it equal to a common anxiety attack. It is no longer a signal designed to ward off the threat of being overwhelmed by a traumatic situation, but the real traumatic situation itself in which the defensive mechanisms have more or less become overwhelmed. As already pointed out by Jones (8), from a physical standpoint the condition of pavor nocturnus is not at all negligible. In sleep an anxiety state represents a real danger. Mechanisms of defence, as well as of discharge through motility, are inoperative. Anxiety during sleep may thus in certain cases result in death due to shock. In pavor nocturnus, therefore, the danger of death is a real threat; the patient actually experiences the process of dying, and is saved from a real danger by waking up.

We know that when the tendency towards wish-fulfilment during sleep releases affects which cause anxiety, the dream is usually broken off at once and replaced by ' full awakening ' (Freud), in order to mobilize the regulative forces of the organism against these affects; i.e. to effect the subordination of the unconscious by the preconscious. The awakening function has to replace the function of reality. But since states of anxiety in all degrees—ranging from a slightly anxious feeling to the most terrible, overwhelming fear of death—exist during sleep, we must assume that the awakening function is paralysed in these cases.

Awakening is a change of cathexis, in the service of the pleasure principle which automatically regulates the cathectic processes. ' Awakening is the striving of the residues of the person towards a restitution of reality-

[3] The defensive function of the catatonoid reaction may be understood as follows: (*a*) An anoxic decortization diminishes, in some degree, the action of the cortex and thus the registration of inflowing stimuli. Since the organism as a whole functions as a sensory motor unit, this blocking includes a paralysis of controlled motor activity, of volition. (*b*) The increase of the tone of the muscular system increases the secretion of adrenalin. (*c*) The catatonic rigidity facilitates respiration and thus steps up the supply of oxygen. No further explanation is required to understand the uncontrolled impulsions (*raptus*) as desperate attempts toward discharge. The catatonoid reaction is thus characterized by the balance which is maintained between a minimum of energy output (low metabolism) and optimal activity of the defence reactions.

adjusted intentionality' (Grotjahn, 7). Turning towards reality involves activation of the sensory motor apparatus, the reinstatement of conscious, voluntary motility, of volition; starting with the tendency to active perception, in this case innervation of the eye muscles (convergence, opening of the lids) which always precedes awakening (Gesell), together with tonic changes of the entire musculature. The impulse to wake up is the intention of the residues of the attentive ego to activate the sensory motor apparatus, and is directly connected with its innervation. The paralysis of this innervation is what we call paralysis of the awakening function; although it would be more correct to speak of a paralysis of the awakening mechanism, since the awakening function proper, performed by the attentive ego, actually is in operation. Probably the impulse to wake up becomes conscious only when the act itself is impeded. The awakening impulse is confronted with a paralysed apparatus. The paralysis of the awakening mechanism in the face of the progressively rising threat of real danger, i.e. of the approaching shock, gives the pavor nocturnus attack its utterly terrifying character of complete helplessness.

How, then, is the awakening none the less brought about in the end? The following hypothesis may be offered. The stupor prevents central registration of perceptions (catatonoid blocking) and, consequently, registration of the anxiety-causing factors. The catatonoid defence is slowly replaced by the excitatory phase, which incites discharge through motility. Thus, at a certain point, the sleeper overcomes the paralysis by an abrupt effort.

Now what exactly should be regarded as pavor nocturnus? Viewed from the angle of this investigation, the anxiety dream, persecution dream, inhibition dream, and nightmare can be conceived as terms in a progression rising in inverse ratio to the degree in which the defensive measures against anxiety are effective.

The pathognomonic sign of pavor nocturnus is the paralysis, indicating the onset of a more or less severe catatonoid reaction. We may therefore apply the term pavor nocturnus to any state of anxiety in sleep, in which the symptom of paralysis is present; this being a manifestation of the catatonoid reaction, due to a deficiency of the normal, regulatory mechanisms against shock. The paralysis factor may be hallucinatorily connected with the dream content; or manifested in somatic phenomena: paralysis of motility, respiration, circulation; or, finally, reflected in the inability to escape from the vital danger by waking up. The somatic phenomena and the paralysis of the awakening mechanism, when they appear in combination, characterize the fully developed pavor nocturnus or what is commonly described as nightmare.

The blocking of perceptual capacity, which takes place in the catatonoid reaction, may be the prototype of the mechanism of primal repression. Repression may thus be an attenuated reproduction of the catatonoid reaction, induced by the ego; i.e. a reproduction of a reaction which in earlier experiences proved effective in the defence against shock. The relation between primary repression (catatonoid blocking) and repression would thus correspond to that between primary anxiety and signal anxiety. Anxiety, fright, rage, and repression are mainly defence mechanisms against shock.

As to the manifold individual phenomena in pavor nocturnus, such as the inability to breathe, oppression on the chest, the feeling of an iron band around the head, shrinking of the body, withering, becoming rigid like stone or wood, sensations of depersonalization, of fainting, falling, etc., these can for the most part be traced without difficulty to the somatic symptoms of the shock complex. For example, the feeling of annihilation 'as though an icy fist were clutching at the heart', which accompanies both nightmare and fright, a complex known to be the basis of precordial anxiety, may be readily explained by anoxia of the capillaries of the heart.

The disturbance of the vestibular function, as well as the distortions of the body feeling through shock, would deserve a special description. The connections which exist between strong emotions, disturbances of the vestibular function, changes of body feeling and of space perception (enlargement, shrinking, etc.), are known (Schilder; Federn). All these processes are reflected in the pavor nocturnus hallucinations. They should be subjected to special examination; especially in connection with the castration complex, on the basis of the well-known equation body = phallus.

Some of the principal and essential features of the pavor nocturnus process may be summarized as follows:

(1) Somatic phenomena of the shock com-

plex, which may become more or less preponderant in pavor nocturnus, are condensed with the preceding dream content. They are experienced hallucinatorily, in fusion with the pictorial representations conditioned by the dream content.

(2) The hallucinatory use and representation of dream-conditioned elements become diminished, in the course of the attack, in the same measure as the somatic phenomena become predominant and intense.

(3) The hallucinations in pavor nocturnus assume an immeasurably stronger character of reality than do ordinary dream hallucinations; partly because they correspond to real, i.e. somatic, processes taking place in the body; and further, because during the stage of awakening a realistic character is imparted to these experiences by the gradually reviving function of reality (double orientation: Grotjahn, 7). As a result of this intermediate state between sleeping and waking, the sensation of the reality of the processes becomes transferred to the residual part of the dream hallucination. Thus, like real experiences, the hallucinatory dream experiences in pavor nocturnus exert formative influence throughout life.

(4) In accordance with the narcissistic orientation of the sleep state, the sensations which come from the inside and affect the body are treated as though they were of external origin. The external world into which the somatic sensations are projected is the world of the actual psychic experience at the moment; i.e. the world of the dream which has conditioned the pavor nocturnus. Consequently the threat from the paralysis of vital functions, due to the shock part of the catatonoid reaction, is experienced as an external threat; e.g. as a vampire sitting on the sleeper's chest, etc. By the same token, processes that refer to the body, such as withering or falling, are experienced as earthquakes, crumbling of the walls, hurricanes, etc.

(5) There are functional, autosymbolic representations (Silberer): attempt to escape = attempt to wake up.

(6) The process of orthriogenesis (Federn) during the stage of awakening frequently causes shock experiences of the oral phase to be revived.

In the present article I have given a simplified exposition of the process that seems to underlie pavor nocturnus. In order to deal adequately with the complexities of the psychic superstructure of the phenomenon, it will be necessary to examine the nature of the stimuli causing the over-excitation which finally leads to shock. I must defer this to a later paper, which will be based upon analyses of the dreams preceding pavor nocturnus attacks. These investigations have confirmed the established concept that over-excitation and conditions bordering upon shock are connected with the primal scene, be it by phantasy or by real experience, and with infantile masturbation. But how can sexual processes in the child produce a state close to shock?

I believe that we have not yet considered the full import of the fact that the infantile organism cannot adequately discharge sexual excitation. The child is not capable of full orgasm. This critical discrepancy between the amount of sexual excitation and the means available for its discharge seems to be responsible for the infantile sexual trauma, a fact for which I have been able to find but a single reference in the literature.

The papers left by Freud, contained in the last volume of the *Gesammelte Werke*, include some notes dated June, 1938. On the very last page there is a remark on infantile masturbation (6). In tracing back all intellectual and work inhibitions to the inhibition of infantile masturbation, Freud wrote: '. . . it is not its inhibition due to external influences, but its unsatisfactory nature, per se. *Something is always lacking for full discharge* and gratification . . . *and this thing which is lacking, the reaction of orgasm*, finds equivalent expressions in other fields; absences, outbreaks of laughter, crying (XY), and maybe others'. (Italics mine.) This situation seems to be due to a premature sexual development which is not paralleled by the physical development.

While the mechanisms of defence and discharge prove effective in the daytime, they are not adequate under the conditions of the sleep-state; thus at night the child is unprotected against these break-throughs, which throw it into a shock-like state. We know how much unconscious fears centre around a specific truamatic complex: the castration complex. We ascribe the origin of castration anxiety—which, strangely enough, exists in equal strength in both sexes—to threats of castration, masturbation fears, the sight of the female genitalia, etc. These factors may create the predisposition for the sexual trauma; but it requires the actual experience of severe real

danger to give real, effective power to the fears and phantasies, and this happens when the child is brought close to shock by consequence of sexual excitations.

The pavor nocturnus of children is the sexual trauma. Through the danger experienced in it, the fears of injury to the genitals acquire a power which remains effective throughout life. It seems that the fear of sexuality and of orgasm, which is peculiar to civilization, has its origin in this experience.

The oedipal shock is a reproduction of an economic constellation which in the early phase of life produced the oral shock. This accounts for the oral elements recurring in pavor nocturnus. The problem of neurosis might then be explained in terms of the predisposition of the psychic organism in the face of this trauma. It will be extensively dealt with in the study which is to follow.

(Received 1 March, 1951)

BIBLIOGRAPHY

(1) Baruk, Henri (1949). 'Experimental Catatonia and the Problem of Will and Personality', *J. Nerv. Ment. Dis.*, **110.**

(2) Davis, H. A. (1949). *Shock and the Allied Forms of Failure of Circulation.* New York: Gruene and Stratton.

(3) Deutsch, Helene (1932). *Psycho-Analysis of the Neuroses*, 50–64. London: Hogarth Press.

(4) Freud, S. *Early Papers. Collected Papers*, **1.**

(5) —— (1900). *The Interpretation of Dreams. Basic Writings.* New York. 1938.

(6) —— (1941). *Schriften aus dem Nachlass.* Gesammelte Werke, **17.** London.

(7) Grotjahn, M. (1942). 'The Process of Awakening', *Psychoanal. Rev.*, **29.**

(8) Jones, Ernest. (1931). *On the Nightmare.* London: Hogarth Press.

(9) —— (1938). 'The Pathology of Morbid Anxiety', *Papers on Psycho-Analysis,* 4th ed. Baillière, Tindall & Cox, London.

(10) de Jong, H. (1945). *Experimental Catatonia.* Baltimore: Williams and Wilkins.

(11) Moon, V. H. (1942). *Shock.* Philadelphia: Lea and Febiger.

(12) Nunberg, Hermann (1948). 'On the Catatonic Attack', *Practice and Theory of Psychoanalysis.* New York: Nerv. and Ment. Dis. Publ.

(13) Oberndorf, C. P. (1950). 'The Rôle of Anxiety in Depersonalization', *Int. J. Psycho-Anal.*, **31.**

(14) Ribble, Margaret A. (1941). 'Disorganizing Factors of Infant Personality', *Amer. J. Psychiat*, **98.**

(15) —— (1939). 'Significance of Infantile Sucking for Psychic Development', *J. Nerv. Ment. Dis.*, **90.**

(16) Schonberger, Stephen (1946). 'A Clinical Contribution to the Analysis of the Nightmare-Syndrome', *Psychoanalyt. Rev.*, **33.**

(17) Spitz, René A. (1937). 'Wiederholung, Rhythmus, Langeweile', *Imago*, **33.**

(18) Stern, Max M. (1951). 'Anxiety, Trauma and Shock', *Psa. Quart.*, **20.**

(19) Tanner, Henry (1950). 'Physiological and Psychological Factors in Electro-Shock', *J. Nerv. Ment. Dis.*, **111.**

(20) Waelder, Jenny (1935). 'Analyse eines Falles von Pavor Nocturnus', *Z. f. psychoanal. Paedogogik*, **1.**

A CLINICAL CONTRIBUTION TO THE ANALYSIS OF GESTURES[1]

By E. GOSTYNSKI, MANCHESTER

Although a great deal of analytical literature exists on the gross psychological abnormalities of general motor behaviour, clinical observations on expressive movements have remained rare. In his early writings Freud paid attention to the patient's symptomatic actions and to their clinical significance in the analytical session. Theories of normal development of motor behaviour, both expressive and purposive, were put forward in papers by Landauer, Ferenczi and Fenichel. Stages of gradual transition were described. Starting with the uncoordinated infantile movements, which are aimed primarily at discharge of tension, the development ends in the adult's integrated general motor behaviour under the control of the reality principle. These authors stressed the important role of over-determination in normal and abnormal development, and the need for special investigations of this factor. In a recent paper, Ernst Kris emphasized anew the comparative lack of clinical data on the slighter psychological disturbances of expressive and general movement. Felix Deutsch, analysing postural behaviour, recorded in posturograms all the bodily movements of seventeen patients during successive analytical sessions. He correlated the movements with the concomitant verbalized material. Patients showed at the start of analysis a basic posture, which altered during analysis. The new movements resembled primitive infantile actions and attitudes and were perhaps characteristic of the periods corresponding to the released primitive instinctual drives. Gestures and postures became meaningful and could be interpreted when they accompanied repeatedly the same verbal expressions of the unconscious. The role of over-determination was emphasized, but not worked out in detail. These references, though only few in number, date from all periods of analytical literature. All accentuate the importance of the principle of over-determination in the development of normal and disturbed expressive behaviour. Yet detailed information of this kind has remained rare. It seemed therefore justifiable, even at as late a date as this, to draw on the analysis of an individual case for as much detail as possible. The selection of the case material was favoured and prompted by one main point. The patient's expressive movements concerned mostly the upper extremities, and they were gestures mainly of the right hand. The field of investigation was therefore comparatively limited, but it allowed a more detailed analysis of an otherwise most unwieldy subject matter. During the analysis a new set of gestures appeared. The original gestures were gesticulations. The new set was magical. The analysis of the features common to both sets provided an opportunity to study aspects of the integrative process, which blends the expressive movements into the appearance characteristic of a particular individual. A third group of movements comprised various forms of restless fidgeting, but the attention in this paper will be centred mainly on the first and second groups.

The object of the investigation—over-determination of the gestures—made the presentation of the clinical material difficult. In order to avoid unnecessary and lengthy repetition, a detailed general case history is not provided. The description as a rule follows developments in the analysis. Wherever necessary, further information is supplied *en route*. The material relating to the gestures occurred or re-occurred during the third year of the analysis and was worked through during the greater part of that year. The patient is a married woman of thirty years of age. She was an only child. Her family background and upbringing laid stress on formal behaviour; gesticulation was not customary in her environment. She wanted to be analysed because of difficulties in her marriage. Although neurotic symptoms were absent at the start of the analysis, it became evident that she had a hysterical character. Her general expressive

[1] Read at a meeting of the British Psycho-Analytical Society on 7 February, 1951.

motor behaviour deserves mentioning briefly. It varied little at first. Entering was standardized into a routine formality. She was always standing when I called for her in the waiting room, ready to come forward, holding out her hand with a faint smile on her face. Thereby she wished to show eagerness and pleasant anticipation at seeing me. In the consulting room, hat, coat, gloves, bag and whatever else she was carrying were all put down in the same places. Most of them were inconvenient for her. The choice of place was determined by a wish to avoid using my desk or the chair in front of it. The avoidance demonstrated firstly a censure of me for not providing a proper place, as she called it. Secondly, it was a denial of a desire to go through the drawers and to see what they contained. Her father's desk had been an object of her curiosity as a child. Its exploration used to have an irresistible attraction for her. By avoiding to come near the drawers of *my* desk, she tried to maintain the repression of a scoptophilic impulse, relating to the father's genitals. The distance which she kept from the desk demonstrated also, in a magical way, the distance at which she tried to keep her interest in the father-figure by repressing it. Once she put her things on the desk and chair; at that moment the repression had failed temporarily. It occurred after meeting the previous patient, who impressed her as being well-dressed. It reminded her immediately of two triangle situations in childhood. On both occasions she felt jealous of a well-dressed rival, once in connection with her father and an older girl, and then again with a greatly loved uncle and his wife. The avoidance therefore covered not only the scoptophilic instinct but also the positive Œdipus complex. The censure and the insistence on the proper place originated from an identification with her mother, who was Victorian and prudish and contemptuous of the father. Everything judged improper was kept in check by this process. The attitudes displayed by word and gesture reflected shifts in the libidinal cathexis. Shifts in the transference situation were heralded throughout this period by modifications of motor behaviour.

On the couch the postural attitude of the lower half of the body formed a contrast to that of the upper half. From the moment of lying down, the left leg was crossed over the right; the legs were never crossed the opposite way. The left knee was kept bent above the right one, with the left leg resting on its heel. Occasionally there were short jerks in this leg. The distribution of motor activity between left and right and the exclusive localization of movements on the one side or the other were observed again in the hand gestures. The possible significance of this phenomenon will be considered later. The head was rarely turned to the left, it was either kept straight or mostly turned to the right. The upper extremities were never kept in a rigid position. From the beginning of the analysis, the hands and arms were used for expressive movements. These movements occurred with regularity and had the appearance of usual forms of gesticulation. They used to accompany the verbal expressions of affective attitudes. In this paper the gestures are described first; then a detailed reference is made to the emotional attitudes with which they occur; finally the physical aspect of the gestures is considered.

When she felt hopelessness, emptiness and resignation, she used to make a quick gesture, in which both arms were flexed at the elbows, the forearms rotated outwards, the hands were open showing both palms, the thumbs were kept rigidly in extension and abduction. The emotional situation underlined by the gesture formed the patient's prevailing mood in reality. It was reflected in the rationalizations covering the continuation of the marriage, where unconscious guilt feelings urged her to accept the position as a form of punishment. The guilt feelings referred to infantile fantasies of robbing the father of his penis. 'Success in failing' was her motto in the analysis too. Her pessimism was a reaction formation; hope for a penis became hopelessness. The feeling of emptiness represented a denial of her wish to incorporate the penis. The inactivity of the resigned attitude constituted a reversal from the aggressive activity into passivity. The 'open hand' gesture therefore went together with an attitude, which resulted from a defensive operation of the ego.

Another gesture, of the right hand only, accompanied emphatic statements. It involved a rigid extension and abduction of the thumb with the other four fingers fully flexed. With inward rotation of the arm the thumb would make a movement of pushing forwards; with outward rotation of the arm, the gesture would come to resemble the well-known 'thumbs up'. Both varieties accompanied more open expressions of aggressiveness. The second would, for instance, go with the somewhat superior manner in which she would express a tolerant rejection of analytical interpretations, often describing them as plausible stories. With this contemptuous attitude, she warded off sexual fantasies and sexual excitement, caused by listening to the analyst's voice. Listening to his stories and hearing his voice mark phases of her relationship to the father. During the first phase, she was thrilled when the father, sitting at her bedside, would tell her stories. At that time the father was very much loved by her and was felt to be on her side against the mother. At a later stage the position was reversed. She sided with the mother; the father appeared clumsy, awkward and gauche. Now his stories sounded merely plausible and hearing them had lost its previous thrill. The development ended in contempt, mingled with pity. The father had become a child. She felt that at any time she could show her superiority over him. In the feeling of superiority over him and contempt for him she had

identified herself with the mother's contempt for the father. This identification served as a defensive barrier against the libidinous wishes of the positive Œdipus complex. Both attitudes also describe a reversal of the relative strength and weakness. She had introjected the father's strength—his penis—and had projected her own weakness—the lack of one. We have seen earlier that her general postural behaviour at the beginning of the session was a similar repetition of these infantile object relationships in the transference. The ' thumbs up ' gesture, together with the contemptuous superiority, forms another unit of the character structure. It is a successful attempt to bind guilt and anxiety, which threatens the ego from the failure of keeping incestuous wishes repressed and from the realization of the lack of a penis. The appearance in the transference made the defensive ego mechanisms accessible to the analysis. The pushing forward movement of the thumb accompanied memories of playing at father and mother with a little boy friend. He was the father and she was the mother, her doll was their baby. One day, when he stopped being the father and became a dentist, there was an accident. He pushed the doll's teeth in with his thumb, so that the loose teeth were inside the doll's mouth. Other material indicated that in fantasy she took not only the place of the mother, but also that of the doll. When the little boy pushed the teeth in, it was fantasied as an attack on herself, symbolically representing a castration. When now, in support of emphatic statements, she makes the pushing forward movement herself, she has identified herself with the aggressor. Here again, the gesture is an expression of the defensive operations of the ego.

The movements discussed so far had occurred as gesticulations throughout the analysis. Earlier attempts to analyse them were unsuccessful. But they became accessible to working through after another affective attitude and its corresponding expressive hand movement had acquired significance in the transference situation. It was the gesture of looking at her finger-nails. The patient was only vaguely conscious of her gesticulations outside the analysis. She just had an awareness of a tendency to gesticulate without being able to describe a habitual gesticulatory behaviour. The gesture of inspecting the finger-nails was the only hand movement of which she has always been fully conscious. When she makes this gesture, she looks at the finger-nails of her right hand. The fingers are flexed, the thumb is enclosed by the other fingers. She looks at the finger-nails, which are pointing downwards. She prefers to look at them this way, because she cannot see her fingers then, the shape of which she does not like. There is a scar from a cut on one of the fingers. To look at it disturbs her sense of perfection. She makes the gesture when she wants to master strong feelings and when she wants to distance herself from their cause. In the analysis it signified another attempt at controlling genital sensations and sexual excitement, which were aroused by hearing my voice. When she looked at her finger-nails and hands at these moments, it became clear to her that the gesture fulfilled a purpose in the mental economy. My voice sounded like music to her. She did not regard the voice as an instrument of language only, but as one of ' generation ', a term which she borrowed from the electrical sciences. The voice generated feelings. The impact and entry of the sounds into the ear were to her a symbolical demonstration of sexual intercourse. These individual symbolizations recall the findings of Ernest Jones. He showed the close relationship which exists in mythological data between God—Father—Sound as impregnating principles and the ear as an organ of conception. He also found material which showed the use of tongue and language as phallic symbols. I have referred already to the great importance which the father's voice had for my patient. Listening to music too is connected closely with the father. He was a very good pianist, and she used to watch his hands while he was playing. The experience in the transference of sexual excitement through sound mobilized memories of earlier periods of masturbation and led to masturbation without any fantasy. Then she dreamed that she came to the analysis and found that her hands were dirty from the garden, especially her finger-nails. She felt very guilty and unworthy. A particularly strong guilt feeling was attached to episodes in early adolescence, when she had cunnilingus performed on her by her dog. Fenichel states that ' in one type of love for animals the person has remained fixated at the stage of partial love and sees in animals penis symbols.' My patient dreamed: ' Somebody—a woman—has on her knee the governor's baby, who is very much smaller than a real baby; suddenly the baby turns into a puppy; the puppy throws a fit.' This dream made it clear that the dog was to her a symbol of the father's erect penis. The detached attitude, together with the looking at the finger-nails, in this instance served to lessen temptation by withdrawal of libido.

Following the adolescent masturbation experiences, the relationship between father and daughter deteriorated to silences, which she called ' sticky patches'. This phase was now repeated in the transference. There were increasingly long stretches of silence, which she also called ' sticky patches '. Interpretations then led to a new defensive position of the ego, with regression to a magical and omnipotent stage. Concurrently a change in her arm and hand movements took place. The first new movement appeared mostly during a silence. The right arm was extended stiffly sideways, the right thumb was extended and abducted, the other fingers were fully flexed. The patient was looking to the right, her arm pointing towards an electric radiator. Her associations to this movement were: she was trying to blot out the electric fire by bringing

the thumb in line with the bar: it meant blotting out the analyst, she added spontaneously. Another gesture appeared a little later. Here, the right thumb, again extended and abducted, was resting on the couch and the hand was balanced on the thumb. Whether these new gestures were new creations or whether they were repetitions and re-enactments could not be ascertained definitely. Their analysis led eventually to her fear of the lack of a penis and to the elaborate structure designed to bind this fear. The gesture of blotting me out was determined by several motives. Firstly, it represented an attempt of the ego to avoid narcissistic mortification. In that respect, it amounts to a negative hallucination and is a forerunner of the mechanism of denial. Ferenczi described the developmental stages of reality testing in terms of periods of omnipotent magic gestures. This patient's magic gestures show that the body ego institutions can be used for the opposite purpose, namely for the restriction of reality testing and for the denial of a painful reality. The same magical functioning appeared in respect of the patient's eye. She recalled a childhood memory, dating from about the age of over five. She saw her father undressed and saw his reflection in the mirror. She had only a vague impression of something pink, nothing standing out. She had no memory of the pubic hair, although the father was dark. Father's penis and pubic hair were blotted out. Before she had seen the father's body, a boy cousin had already exhibited his penis to her. She was therefore quite aware of the anatomical difference. Secondly, the blotting out by eye and hand gratifies the penis envy and the incorporation fantasies. This significance appeared first in the punishment ideas, in which eye and hand were linked in her mind. She thought with the Bible: 'If thine eye offend thee, pluck it out. If thy hand offend thee, cut it off.' With the adoption of the biblical punishment, she robbed herself of two organs, most necessary for exploration and introjection, as a punishment for the wish to castrate the father and to introject his penis. The post-œdipal relationship to the father showed a steady diminution of his size and a proportionately steady increase of her own size. The father became an equal. Later on she felt superior to him and eventually became contemptuous of him. She regarded him as a child. Now *she* had the power, which she used to see in the father; she had introjected his penis. Consciously, she had accepted the lack of a penis and had libidinized this position. She always used to say in protest that any such idea as a wish for a penis was far from her mind. I soon took that reply to mean far from her conscious mind, and therefore to be a confirmation. She would say also that she liked her own shape, meaning her genitals, but in her dreams and fantasy life the idea of having a penis persisted. She saw herself equipped either with a penis or with an object most clearly the symbolic equivalent of a penis. In adolescence she fantasied herself as St. Joan. Two of her oldest wishes were to become an architect—a person who plans the erection of buildings—and to play the 'cello. During the analysis she started to play the 'cello. The addition of the 'cello to her body put a big instrument between her legs, one that produced sound capable of causing feelings in the listener. But her unconscious was not satisfied with merely playing the instrument. She also produced a facial tic which she believed to be a characteristic of the male professional 'cellist. In the transference the aggressive significance of the 'blotting out' became particularly obvious. She had succeeded in denying any sense of physical insufficiency. The whole conflict with all the secondary elaborations was transferred to the mind. Her mind appeared to her as inadequate and deficient. Other people, both men and women, particularly the analyst, had better, more perfect minds. She kept on saying that she had no clue, thinking of the French word for key—*clef*. 'Key' has always meant penis to her; yet when given a clue—an analytical interpretation—she would immediately proceed to blot it out. When she felt urged by weight of evidence to acknowledge an interpretation she felt 'worsted'. This word suggested to her a fantasy of two medieval knights on horseback engaged in a duel with swords. In the gesture, it is the right thumb which blots out and acts therefore magically as a phallic equivalent, denying her inadequacy. Thirdly, the blotting out was intended as a magical protection against temptation. The analyst and his possessions became representatives in reality for her repressed Œdipus wishes. The analytical process was understood by her as interest on the analyst's part and had to be 'stone-walled' in a way similar to that in which the father's questions had to be left unanswered during the 'sticky patches' of silence. To blot out the fire constitutes a magical attempt at controlling the repressed Œdipus wishes. She kept on protesting that she was not worthy of all the attention which she felt was centred on her in the analysis. She wanted support from the analyst in these altruistic feelings, in which she resigned in favour of the rival. The blotting-out gesture in this respect signified a request that the analyst should not become a tempting figure like the father but a forbidding figure like the mother.

The other new gesture, which followed the 'blotting out', was the balancing of the right hand on the tip of the right rigid thumb. This movement would accompany descriptions of a new awareness of herself in reality and in the analysis. The patient's reality had mattered little to her so far. Mostly she felt that she was walking about in a dream. Things got done mechanically. Nothing made much impression and according to her nothing much happened. She suffered from a mild derealization and therefore life appeared empty. If reality impinged on her the 'dream' feeling gave way to

the mood of hopeless and pessimistic resignation. In this clinical material is illustrated the connection, described by Hoffer, between the early negative hallucination and the later state of derealization. With the progress of the patient's analysis the libidinal cathexis was altered and more object libido became available. Now appeared tension and eventually fear. The balancing gesture occurred with descriptions of herself walking along the edge of a precipice and having to tread warily. Her associations to the danger were that one wrong step would take her into nothingness, a pit, and the pit brought the idea vagina. The dreaded accident of losing her balance involves the fear of falling and the implied symbolic significance. But further than this, it shows how strong her fear of being without a penis really is. It is unconsciously equated by her with total destruction and death. In the childhood episode she identified herself with the doll which lost the teeth—the penis—but had them inside her mouth, picturing in one action the feared lack and the compensatory introjection. She used to consider whether a man could survive the loss of his penis in an accident. She identified herself also with a man who had lost his left arm in an accident. The identifications are based on an unconscious fantasy of herself as a being who has had a penis, but has lost it by an accident. The symbolic equation, body = phallus, was acted out in fantasies underlying the exploring of rooms and caves during the latency years. It signified a first displacement and denial of the lack of a penis. In masturbation exploring of body and vagina was associated with hopeful thoughts of surprising finds in passages. The thoughts dated from an unconscious fantasy of the existence of a hidden penis. This was the second denial, saying: If the penis cannot be found outside it may be inside. Concurrently operative was also the fantasied visual, aural and manual introjection of the father's erect penis. Hand equalled penis when she used it in very occasional manual masturbation without object fantasy. It started as clitoris masturbation, but remained unsatisfactory through a persistence of ' emptiness ' in the vagina. The right hand was then used to ' fill the emptiness where a penis should have been '. She did not fantasy her hand as a man's penis and herself in sexual intercourse with the man. Her hand inside the vagina was the introjected penis. At the time when the balancing gesture appeared in the analysis, she began to feel very unsure of herself in reality. She felt that she had to be very careful. If her friends only knew of her deficiencies they would easily see through her. She felt a freak and a fraud. They would realize that behind her armour there was nothing. They would then turn away in disgust in the same way in which people must react with disgust to the repulsive sight of the man with the amputated left arm. This last image represented her identification with the castrated father, who in the later phases of their relationship was felt by her to be *gauche*, the French word for left. She felt that the analysis had made her worse instead of better. She had hoped that it would make her more perfect. Instead she realized with growing alarm that her balance might be upset even more, and that there was no knowing what was to come next. The precarious balance of which she speaks is enacted in the balancing gesture. Her world stands and falls with the imaginary possession of a phallus symbolized in the right thumb.

The mode and frequency of use of the thumb in these gestures have been pointed out several times and have been ascribed to the use of the thumb as a phallic symbol. One might be inclined to argue that the thumb movement of opposition increases enormously the usefulness of the hand as a prehensile organ. The thumb would then be used anyhow extensively in expressive and purposive movements. This factor finds expression in the proportionately large area allocated to thumb and forefinger movement in the motor area of the cerebral cortex. The distinctive feature in *these* gestures is the stereotyped repetition of thumb movement. The thumb is either hidden, enclosed in the other fingers, or it is rigidly extended and abducted. The significance of parts of the body, particularly of hand and foot, as penis symbols is well enough known. The thumb qualifies especially well as a phallic symbol by its ability to stand up and away from the other fingers. The word itself is derived from a widespread etymological root, identifiable not only in the Teutonic *tu* equal to ' to swell ', but also in the Sanskrit word *tumra* meaning ' fat ', and in the Latin word *tumere* meaning ' to swell '. In English slang ' to thumb a woman ' means to have intercourse with her. In Grimm's fairy tale, Tom Thumb is always hiding in distinctly symbolical cavities and is endowed with remarkable gifts, in spite of his small size. In those childhood memories of adventurous exploring, my patient acted out, as already mentioned, the fantasy of her own body as a phallus, denying thereby the lack of a penis. She herself was like Tom Thumb in the fairy tale. And like Gulliver in Brobdingnag she felt surrounded by giants. She felt so small that she could not encompass the total object but only part objects at eye level. At that time (she spoke of the age of four or five), the parents' hands became the centre of her attention. She did not like the mother's hands, her fingers were too short. The father's fingers were long. She held on to his hand when the two of them went for a walk. She looked at his hands when he played the piano. At table she used to play with the father's fingers, moving them up and down and pinching them. To her the father's most important organ was his hand and not his penis, which was at the same eye level. In the memory of seeing the father undressed, nothing stood out. The father had hands, but no penis. The penis was blotted out. This word

expresses at the same time the denial of reality and the wish to castrate the father and to incorporate visually his penis. The little girl went through a period of what I would like to call hand fetishism. Freud defined the fetish in male fetishists as a substitute for the mother's phallus. The little boy refuses to accept the fact that the woman lacks a penis as protection against his castration anxiety. According to Fenichel fetishism as a fully developed perversion is rare in the female sex. When it occurs, the penis symbol serves as a reassurance against feelings arising from the lack of a penis. In my patient's case, Freud's definition appears to be reversed. The little girl refused to believe that the father had a penis as protection against her fear concerning the lack of one. As an object of interest she chose a different part of his body, a part which she herself possessed too, the hand. The fetishistic period followed the denial of the sensory perception. It was succeeded in turn by the various stages of partial and total introjection. I hope to give a fuller account on another occasion. The remnants of the fetishistic period appear in the overcathexis of her own hand. In the constant looking at her own hands is indicated the introjection of the penis, with the result that now the important organ is part of her own body: the thumb will erect like a penis.

What has been described so far? We heard of a stereotype gestural behaviour. It accompanied habitually thoughts and feelings arising from affective attitudes. The investigation was concentrated on the genetic process, by means of which these attitudes had become permanent aspects of the character structure. The gestures themselves at first represented accentuations, lending weight to the words of the particular moment. At a deeper level they acted as a sign language. The features common to both stages repeated in reverse order the implications of Freud's statement that thinking is trial acting (*probehandeln*). At the sign language level a magically omnipotent ego used its motor and sensory apparatus for the denial of a painful reality and/or for the warding off of id-components projected into reality and/or for the introjection of part objects. Later the defensive operations of the ego were transferred to the thought level. Here they expressed themselves in the various attitudes as parts of the character structure. The gestures at that level were rudimentary reminders of the previous stage. They betrayed their origin by retaining features of that stage. The history of the gesticulatory behaviour in the past unfinished defensive struggles of the ego formed its strongest motivation in this case. Displacement from the eye to the hand contributed to the production of the 'blotting out' movement. The close co-ordination between eye and hand from early beginnings will have favoured this displacement. The movement of the thumb said: I cannot see your penis, consequently you have not got it; I have got it in front of me. Displacement from below upwards lessened the tension by deflection from the original centre of the conflict. It found support in the denial by means of the symbolical substitute of the thumb. Therefore the gesticulatory activity increased and urged itself on the analysis at a moment when the ego was engaged most strongly in warding off genital excitement during the session. Any increase of the excitement would have mobilized further the guilt and anxiety arising from the experience of Œdipus wishes and from the realization of the lack of a penis. The open hand expressed 'I have not pinched the penis', while the rigid thumb, which went with this gesture, indicated the continued existence of the fantasied fulfilment of the wish. The pushing forward of the thumb and the 'thumbs up' gesture expressed the hidden strength: at the right moment I can push you over, castrate and kill you, even though you seem to be winning now. The balancing movement provided a continuous sensory stimulus from the stiffly held thumb; it said: I can feel I have a penis, only I must be careful not to be involved in an accident, namely be castrated by falling, i.e. by having sexual intercourse. These movements and the corresponding affective attitudes regulated magically the position of the patient's ego in relation to the super-ego and id, in relation to reality and in relation to the object. In respect of the first the ego felt more secure, as the anxiety and guilt were bound by the various mechanisms described. (Denial, incorporation and identification, repression, regression and the reaction formations in the character structure.) Towards reality it was split into a conscious intellectual recognition and into an unconscious persistence of the denial with continuation of the wish-fulfilment fantasy. Towards the object the ego could maintain this security only with difficulty. To avoid re-experience of the narcissistic injury—the realization of a lack of a penis—the ego restricted itself in its object choice. After many promiscuous passive relationships with virile men the patient escaped into marriage with a man who told her that his potency was doubtful. This deficiency conformed to an important condition imposed on her object choice. With this man she was going to be active and she felt sure that she would be able to induce and to maintain satisfactory erections. In the analysis this ego-restricting process was instituted by means of libido withdrawal, accompanied by the 'looking at the nails' gesture. The gesture, again magically, expressed by the concealed thumb the possession of a hidden penis, by the looking at the nails a state of heightened narcissistic cathexis of a part of the ego, by the avoidance of looking at the scar on the back of the hand the denial of being without a penis. The choice of gestural behaviour as a vehicle of ego defence was determined further in this case by the instinctual energy used. Anna Freud and Fenichel have described how the ego may draw the energy used for defence from instinc-

tual sources. The gestures offered facilities for using up energy derived particularly from the scoptophilic instinct. Activities promoted by this instinct were responsible in the first place for the succession of narcissistic traumata. With the description of herself as a blind person in need of constant guidance, who cannot see the next step in front of her, she illustrated the damming up of active scoptophilia in order to exclude the painful external reality. The ego used the dammed-up instinctual energy as fuel for its combined operations: in the gestures the patient looked at and showed to herself a narcissistically overcathected part of herself.

Another observation had impressed itself right from the start, namely the distribution of movements over the right or the left side of the body. In analytical literature right side and left side are known for their symbolic significance, right meaning correct and left meaning wrong, or right heterosexual and left homosexual. Ferenczi added that the left side may be more accessible to the unconscious than the right, because the right receives greater attention and is therefore protected from unconscious influence. What information does this case provide? Attention has been drawn to the comparative concentration of movement on the right side. She dreamed: 'I am coming to see you for my eye; we are both standing up; my left hand is by my side; I suddenly felt that *it* was touching your penis; my right arm was around your neck.' It is obvious that the right arm is doing the conventionally more permissible thing, namely to embrace. The left hand not only touches the penis, it wants to remove and to appropriate it. This is borne out by her sudden thoughts and impulses to cut off her left hand; these ideas did not appear in relation to the right hand. The dream element '*it* was touching' uses the only impersonal pronoun in the whole dream. This indicates an autonomous activity of the hand, the hand is split off from the ego. The inactivity of the left hand in the expressive movements therefore shows a disturbance of ego integration. Left exists in her mind as an equivalent of clumsy and *gauche*. The two adjectives refer to the father. They are judgements; they signify the fantasied fulfilment of the wish to rob him of his strength, of his erect penis. In the transference this desire appeared as a kleptomanic impulse. She felt light-fingered in respect of my nameplate. She specified particularly the one on the front of the house. *Gauche* and clumsy are epithets which she also applies to herself. They reflect an identification with the castrated and weak father, whom she would ridicule to herself only to feel strong guilt about it afterwards.

The shift to the right in the bodily sphere symbolizes a shift of emphasis in object-cathexis: from father to mother. The movement of the right arm in the dream is prompted by aim-inhibited feelings towards the father, which were partly due to her desire to placate the mother. The idea of doing the right thing is connected also with the Victorian and domineering mother, for whom the patient could never do anything right. Memories of this kind reflect a particular emphasis on formal manners and on speech. The stilted behaviour described earlier on was the result of identification with the mother. The speech inhibition increased the more the analysis moved towards the repressed libidinous and aggressive wishes and impulses. The mother set great store by the choice of right words. Not only were the references to the body tabooed, but also all the 'improper' words which the child heard outside, the slang and obscene words. The first word that came to her mind as an example for the forbidden words was the word 'pinch'. In addition to all other meanings it is of course the slang expression for stealing. You may remember that she used to 'pinch' the father's fingers and that she felt like pinching my nameplate. The shift to the right consolidated barriers against the kleptomanic impulses. The right hand was frequently engaged in pinching movements of the fingers against the thumb at this time. The pinching in this case has changed its character. It now inflicts pain on herself. The instinct has turned against the self. The pinching in the sense of stealing was concentrated on the left side with the instinct turned towards an object. It may appear contradictory that the cathexis of the right side should at the same time represent an identification with the forbidding mother and the introjection of the father's penis symbolized in the right thumb. One might ask: Why is the right thumb not symbolic for the introjected penis of a phallic mother? Some material actually can be understood in this way. The patient described the mother as domineering. She felt jealous of women who were dressed better than herself. A domineering woman is thought of as masculine, and woman's dress may figure as a penis symbol. In the displacement to the mind she felt that men *and* women have better minds than her own inadequate one. There may then have been a period when she felt that everybody had a penis except herself, but so far no other material has appeared in support. In two periods of exhibitionism with girls the exhibited parts were buttocks and breasts. The indications are that the patient undertook a double denial: the denial that the father *has* a penis and the denial that the mother has *no* penis. The first was accomplished by the period of fetishism. The second involved a partial regression to a passively submissive and masochistic relationship with the mother. I shall suggest presently another explanation of the apparent contradiction.

Although this development, symbolized by the shift of motor activity from the left to the right, seems to corroborate the known symbolic equations, the dividing line between the two was not found to be very clear-cut in this case. Left for homosexual

and right for heterosexual could not be identified clearly. The accepted meanings do not seem to cover the possibilities sufficiently. It has to be kept in mind that the human brain is distinguished from that of all other animals by the phenomenon of dominance. Reference to this fact has not been found by me in analytical literature. The more usual form is present in right-handed persons and is known as ' left cerebral dominance '. It is connected with ' handedness '. In a right-handed person, such as this patient is, expressive and purposive movements would tend to be emphasized on the right side. Perhaps it should be considered also that right and left are not only physical orientations and that the acquisition of speech is just as distinctive for man as the phenomenon of cerebral dominance. The words ' right ' and ' left ' in a number of modern and ancient languages cover a physical as well as a mental orientation. The word ' left ' in left-handed is used to describe the ambiguous and questionable, the unpropitious, the illegal. Similar meanings apply to the German *links*. The Latin *laevus* means unpropitious and heralding ill-fortune. The Greek *laios* has the meaning ambiguous. The word ' right ', apart from the physical aspect, finds an enormous application in moral, legal and social aspects. The German *rechts* has similarly wide usage. The Latin *rectus* with the same meanings is derived from the root *reg* which forms the words *rego* and *rex*, namely to dominate and control and the word for king. The Greek word *dexios* has all the physical and metaphorical meanings so far described. On the whole the physical orientation towards the right side is paralleled by the emotional tone of the abstract uses of the word ' right '. In these abstract meanings of ' right ' and ' left ' the tendency of a shift is evident, in which a movement away from the left is described. According to Gesell various factors have been held responsible for the appearance of dominance: social pressure, functional superiority or favourable blood supply of the left cerebral hemisphere, structural superiority of the right arm, fetal position and the tonic neck reflexes. None of these theories has been established firmly. On the basis of my preliminary investigations connected with gestural behaviour, I consider it likely that the phenomenon of cerebral dominance represents a functional deposit in organic structure acquired during phylogenesis. In view of the parallel significance of the language symbols ' right ' and ' left ' this functional deposit may have been the result of one step towards differentiation of mental structure into ego and id. In the id one possible focus of Freud's primary repression and in the ego one possible focus of an archaic ego-superego may have been deposited during this schism. In this respect cerebral dominance would be the result and not the forerunner of the altered mental structure. The original motivations may still be reflected in myths and in some of the superstitious religions, where left and right are related to the position of the sun in terms of midnight = dark and noon = light. A fuller research into the whole problem is reserved for a separate occasion. Indications of a repetition of such development during ontogenesis exist in observations made by Gesell. Infants do not show beginnings of hand preference much before six months of age and in a more marked sense not before eighteen months to two years. A very definite increase of vocabulary occurs at about the same age of just over eighteen months. Reversely children with a lagging development of hand preference often show a retardation of early speech development. In my patient, neurotic distortion has over-accentuated the inborn trends. The left has come to represent the libidinous and aggressive impulses towards the father. These impulses are called by her ' sinister and dark .' The right represents the same impulses towards the mother. The development results first in identifications with the father—' left '—and ends in identifications with the mother, emphasising the shift towards the right. The symbolical significance of right and left is therefore not so strictly concerned with ' correct ' and ' wrong ' *per se*, but it stands in relation to the strongest structural element in the super-ego. The curtailed activity of the left arm affects only the expressive, not the purposive movements. The patient behaves as if the subcortical level has been inhibited selectively by the punishment fantasies. The subcortical level in the Central Nervous System is responsible principally for the integration of involuntary movement patterns and for the alteration of tonus. I think that the phenomenon of the curtailed activity explains the apparent contradiction, referred to before, in the argument: I have given up nearly the whole left arm, I am sure I can keep the little right thumb! By unconscious bargaining as it were, the left has paid with the limited autotomy for the crime, while the right continues to use the proceeds for the ego's benefit.

A similar process in respect of disturbed sensibility has been described recently by Flescher, in an application of W. Clifford M. Scott's work, as neurotic mutilation of the body scheme. In my patient the body scheme has been affected in two ways by a disturbance of motility. The punishment ideas and the wish to avoid narcissistic mortification have combined and have led to the withdrawal of cathexis from the expressive movements of the left arm and hand. As a result this extremity became inactive except for the gesture of resignation. The compensatory fantasies have *added* to the body scheme a symbolic equivalent of an introjected penis by the over-cathexis of the right arm, hand and particularly the thumb.

When all this material had been worked through the cathexis of the left side increased. The patient used the left arm much more frequently and the rigidity of behaviour was replaced by greater plasticity. She would now sit down sometimes in

the waiting-room, and on the couch her legs were uncrossed. The magic gestures and the prominent use of the thumb disappeared. Thinking and speaking both became less inhibited. But there followed a phase, which she felt as a paralysis and which was characterized also by the appearance of transitory symptoms. This phase was significant for the transformation of the character disturbance into a neurotic disturbance.

To summarize: The hand gestures of a patient were examined for their various overdeterminations. They were found to underline affective attitudes, which had become permanent features of the character structure. For this function of the gesture the term ' attitude equivalent ' is suggested. The transference situation was found to be the most economical approach to an analysis of the gestures. Displacement from below upwards, displacement to a detail and displacement from one organ to another were found to be operative. The main motivation for the characteristic appearance of the gestures lay in the past unfinished defensive operations of the ego, which were in this case directed against anxiety and guilt arising from infantile object relationships. Gesticulatory behaviour will of course have varied significance in individual and cultural development. But with the support of further material it may be possible to establish typical aspects of development. The choice of the thumb as a phallic symbol was reviewed. The motives for the concentration of expressive movements on the right side were discussed and reference to the phenomenon of cerebral dominance was made.

(Received 26 February, 1951.)

BIBLIOGRAPHY

DEUTSCH, F. (1947). ' Analysis of Postural Behaviour ', *Psa. Quart.*, **16.**

FENICHEL, O. (1928). ' Über organ-libidinöse Begleiterscheinungen der Triebabwehr ', *Int. Z. f. Psa.*, 1928.

—— (1941). *Problems of Psychoanalytic Technique.* New York.

—— (1946), *The Psychoanalytic Theory of Neurosis.* Kegan Paul, London.

—— (1949). ' The symbolic equation: girl = phallus ', *Psa. Quart.* (1949).

FERENCZI, S. (1927). ' Entwicklungsstufen des Wirklichkeitssinnes. Bausteine zur Psychoanalyse ', Bd. I., Int. Psa. Verlag. Wien., 1927.

—— ' Denken und Muskelinnervation ', *Ibid.*, Bd. I.

—— ' Psychoanalytische Betrachtungen über den Tic ', *Ibid.*, Bd. I.

—— ' Über passagère Symptombildungen während der Analyse ', *Ibid.*, Bd. 2.

—— ' Über passagère Symptome ', *Ibid.*, Bd. 2.

—— ' Gulliver-Phantasien ', *Ibid.*, Bd. 3. Hans Huber, Bern, 1939.

—— ' Erklärungsversuch einiger hysterischer Stigmata ', *Ibid.*, Bd. 3.

—— ' Weiteres zur Homosexualität ', *Ibid.*, Bd. 4, Hans Huber. Bern., 1939.

—— ' Chiromantie ', *Ibid.*, Bd. 4.

FLESCHER, J. (1948). ' On Neurotic Disorders of Sensibility and Body Scheme ', *Int. J. Psycho-Anal.*, **29.**

FREUD, A. (1936). *The Ego and the Mechanisms of Defence.* Hogarth Press, London, 1942.

FREUD, S. ' Zur Psychopathologie des Alltagslebens ', *Ges. W.*, Bd. 4.

—— ' Fetischismus ', *Ibid.*, Bd. 14.

GESELL, A. (1945). *The Embryology of Behaviour.* New York, 1945.

—— *The First Five Years of Life.* Methuen, London.

HOFFER, W. (1950). ' Development of the Body Ego ', *Psa. Study of the Child*, **5.** Int. Univ. Press, New York.

JONES, E. ' The Madonna's Conception through the Ear ', *Essays in Applied Psa.* Hogarth Press, London.

KRIS, E. (1940). ' Laughter as an expressive process ', *Int. J. Psycho-Anal.*, 1940, **21.**

LANDAUER, K. (1926). ' Die kindliche Bewegungsunruhe ', *Int. Z. f. Psa.*, **12.**

SCOTT, W. C. M. (1948). ' Some embryological, neurological, psychiatric and psycho-analytic implications of the Body Scheme ', *Int. J. Psycho-Anal.*, **29.**

STEKEL, W. (1911). *Die Sprache des Traumes.* Bergmann, Wiesbaden, 1911.

AN UNKNOWN AUTOBIOGRAPHICAL LETTER BY FREUD AND A SHORT COMMENT

By K. R. EISSLER, New York

In 1907 a number of distinguished persons were invited by the well-known Viennese book dealer and publisher, Hugo Heller, to submit their choice of ' ten good books '. He then published in a little brochure thirty-two of the replies.[1]

Among these was a letter from Sigmund Freud, of which a translation follows:

> You ask me to name ' ten good books ' but vouchsafe no word of explanation, and thus leave it to me not only to select the books but also to interpret your request. Accustomed as I am to heed minute signs, I must adhere to the terms in which you couch your engimatic request. You did not say ' the ten most magnificent works of world literature ' —to which I should have had to reply, as would so many others, Homer, the tragedies of Sophocles, Goethe's *Faust*, Shakespeare's *Hamlet*, *Macbeth*, and so on.
>
> Neither did you say ' the ten most significant books '—which would have involved the inclusion of such scientific achievements as that of Copernicus, the book on belief in witches by an old physician Johann Weier, Darwin's *Descent of Man*, and others. Nor did you even ask for ' favourite books ', among which I should not have forgotten Milton's *Paradise Lost* and Heine's *Lazarus*. Hence I think that special significance attaches to your use of the word ' good ', and that that qualification carries the same implication that we attach to ' good ' friends, to whom a man owes some of his knowledge of life and his *Weltanschauung*: ' good ' books are books which one has enjoyed and likes to recommend to others but which do not compel awe or dwarf a man by their great stature.
>
> I shall name for you ten such ' good books ' which occur to my mind without long reflection:
>
> Multatuli, *Briefe und Werk*.
> Kipling, *Jungle Book*.
> Anatole France, *Sur la pierre blanche*.
> Zola, *Fécondité*.
> Merejkowsky, *Leonardo da Vinci*.
> G. Keller, *Leute von Seldwyla*.
> C. F. Meyer, *Huttens letzte Tage*.
> Macaulay, *Essays*.
> Gomperz, *Griechische Denker*.
> Mark Twain, *Sketches*.
>
> I do not know what you intend to do with this list. It seems strange even to me; I cannot quite let it leave me without comment. The problem of why precisely these and not other equally ' good ' books I do not wish to tackle; I only wish to throw light on the relation between the author and his work. Not in all cases is that relation as firm as, for instance, in Kipling's *Jungle Book*. In most instances I could as well have given preference to another work by the same author; thus I might have chosen Zola's *Docteur Pascal*, and so with others.
>
> A man who has given us one good book has frequently presented us with several good books. In the case of Multatuli I felt unable to discriminate against the ' private letters ' in favour of the love letters, or against the latter in favour of the former, and so I have put down ' Letters and Work '.
>
> Literary productions of purely poetic value in the true sense of the word were excluded from the list probably because your request for good books did not seem to be directed to such works; in the case of C. F. Meyer's *Hutten* I must put its intrinsic

[1] Other replies were from Arthur Schnitzler, Jakob Wassermann, Forel, Peter Altenberg, Hermann Bahr, Masaryk, Ernst Mach. The title of the brochure was *Vom Lesen und von guten Büchern*, ' Of Reading and Good Books '. It was introduced by a letter of Hugo Hofmannsthal and was published by Hugo Heller et Cie., Vienna, 1907. Hofmannsthal's Introduction and twenty of the letters, including Freud's, were reprinted in the *Jahrbuch deutscher Bibliophilen und Literaturfreunde* 1931, edited by Hans Feigl, Vols. 16 and 17, p. 216, Amalthea Verlag, Zürich-Leipzig, pp. 108–127. Freud's letter, 117–119.

worth far above its beauty, edification above æsthetic enjoyment.

Your request to name ten good books touches upon something about which immeasurably much might be said. And so I conclude, in order not to become even more loquacious.

Faithfully yours,
DR. FREUD.

The discovery of an autobiographical document from the hand of Freud affords a welcome occasion for crystallizing into words certain thoughts which a number of scholars must surely have entertained but have found no opportunity to set forth. I therefore take the liberty of subjoining a few general remarks.

Let me start with the possible reactions of a contemporary reader on perusing Freud's brief essay. Depending on the meaning Freud and his work might have for him, he may lay the essay aside with the thought that its discovery is welcome for the sake of completeness but that there is no essential gain in bringing this or similar texts to public attention; or, alternatively, he may enjoy the essay as new evidence of Freud's great stylistic art and his sovereign mastery in rendering the simple superbly individual and beautiful, and thus he may admire the finesse with which Freud first names ten literary masterpieces without answering the query for ten good books. Examination of the other responses shows that in nearly every case the respondent felt impelled to name the books which he thought most impressive—which does not answer the request for ten good books. Freud would apparently have liked to answer in the same vein, and managed to let the reader know where his admiration really lay, but he did so without interrupting the fluidity of his essay. As is so often the case in his writing, a large number of ideas are condensed into a form which at first glance appears clear and simple, but in which a far larger number of ideas is implicit than the simplicity of the form would suggest.

But some among us may attach capital importance to this essay and receive it as an enrichment of our biographical knowledge of Freud's life. The value of such knowledge cannot at present be assessed; potentially posterity may find it invaluable, if some future generation should seriously devote itself to the task of illuminating one of the greatest puzzles in psycho-analysis—the personality of Freud himself.

This very posterity is a questionable factor in my deliberation. Who knows what it will think of Freud? Will his name survive only in the footnotes of the history of psychology? Or will it and the name of psycho-analysis retain a permanent place as the heading of a whole chapter in that history? Or will Freud be thought of mainly as the last great representative of a declining bourgeois class which found in him a sounding-board to describe the mutilation of its own mind by repressions, displacements, and projections? Or will he be called the great corrupter of our morals because he was the first to make it possible for men to think of the immoral and evil without trepidation and horror? These are only a few of the conceivable estimates. The final outcome will also depend on the new equilibrium which occidental society must finally reach in the next half century, when the dark crisis of the present is surmounted.

But when we speculate on what posterity may think of Freud we should be honest enough to speculate also on what posterity may think of our generation. Nearly every generation, as historical records abundantly prove, makes itself ridiculous in the eyes of posterity by committing one blunder or another. With brave gusto and the conviction of our own superiority we heap ridicule upon a university which denied Freud teaching facilities and on scientists who considered Freud's scientific claims too preposterous for discussion. But posterity may wonder not only about the generation of 1900 but also about our own when it finds that twelve years after Freud's death not even every printed word published under his name had been collected and that not much more was known about him than he wanted others to know through his own publications. Posterity may wonder why that generation spent so much effort on its own research and was so sure that its own ideas on psycho-analysis were of vastly greater concern to mankind than the documentation of his great life. Our generation is evidently bent on theory and lacks the sublime hunger for facts which characterized the nineteenth century. The following remark of a scholar, whose words may strike us as a piece of pleasantry, were meant in good earnest: 'It must have occurred to everyone what a great pity it is that there were no active volcanoes like Vesuvius in the heart of ancient Greece. Had it so happened we might have had a chance of digging up a fossil

Greek city at the expiration of a couple of thousand years in as perfect a state of preservation as Pompeii. How delightful it would then have been to wander amongst the dwelling houses of a Pericles.'[2] Posterity may wonder that we, who possessed the dwelling-house of a Pericles, let it perish, and that we left it to chance whether this or that letter, this or that conversation, should or should not reach posterity.

The total history of a man may be trivial, or it may be like a work of art. Among the immense store of biographical records scattered over the world there are only a few which concern the truly great. To make it possible for mankind to be enriched by a new and great life-history, many extraordinary circumstances must conspire. The man must himself be great and the historical conjunctures opportune. Both elements were present in Freud's life. One finds in his history those events which are so often encountered in the biographies of the great, the prophecy of greatness in his childhood, the great isolation and seclusion, the great creative outbursts, the great persecution, the great endurance in the face of inhuman suffering, the exile at the end, and the rise of a myth after death. But even more, his life-history is permeated by that mysterious power significant of the lives of the great which makes every detail remarkable. Everything that makes a man truly great and his history valuable to posterity was present. Whatever turn reality took he responded in a manner characteristic of man at his very best; and when he has one day found a biographer equal to his genius, no one, I surmise, will wish to have a single detail come about otherwise than it did in fact come about. This tendency towards biographical perfection which is characteristic of the lives of the great will surely not be wanting in Freud's. But these are æsthetic and ethical aspects which, though arousing gratitude and reverence in us, might not be sufficient motives for collecting and preserving the scattered scraps and bits of the record of his life which are extant in the form of letters, diaries, and the like.

Gratitude and reverence can hardly be expected to function as strong motivating forces in a historical juncture when the bare survival of society and of the individual has become a debatable issue. Nevertheless there is one incident in Freud's life which, in my judgement, occurs in no other (though the claim has been doubted) and which makes his life unique, unparalleled by anything that happened before or may happen hereafter; it is this which makes Freud's biography unique in a more precise sense than that in which every life-history is unique. I refer to the fact that Freud was able to lift his own repressions solely by his own efforts. Once he had deposited the result of his investigation of his own self in his scientific papers, the chance that such a deed may again occur became infinitely more probable; but if and when it does recur the mere fact of its being a repetition will diminish its heroic quality. It is therefore true of Freud's self-analysis that as a type of psychological and historical event it can never be duplicated; it is a type of event which is represented only by a single occurrence unique in its kind, and incapable of being repeated by any other person.

I think we fail to realize how nearly this event borders on the incredible. It is certainly in contradiction to Boltzmann's formulation of the second law of thermodynamics, that the change from a state of order to one of disorder is more probable than a change in the reverse direction. Freud's piercing of his defences involved the change from a probable state to a highly improbable one. This must have been achieved by a reversal in the usual dynamic pattern of the flow of psychic energy during the state of wakefulness. The pattern of Freud's self-analysis must have approximated partly to that which prevails in dream work, yet without the ego's giving up any one of its peripheral outposts. The reversal of the flow of psychic energy, pleasurable and necessary as it is at night, must have been an unimaginably painful process for an ego attentively pioneering into the depth of its own substructure but lacking the protection of transference to an exalted love object. From time to time it is urged that Freud's self-analysis had historical precursors and that others had been aware of their œdipal ties. Stendhal is certainly a very striking example. But closer scrutiny reveals that, notwithstanding all the unsolved problems in Stendhal's life, his knowledge of his œdipus complex rested on an entirely different mechanism from that of Freud. Stendhal was repeatedly exposed to his mother's seduction, and her passionate kisses overstimulated the boy's highly sensuous temperament far into

[2] Walsh, Benjamin Dann, in *The Comedies of Aristophanes*, pp. Lxxxiv + 420. London: Bailey, 1837, p. ix.

the latency period. There can be no doubt that a large if undetermined number of men have remembered erotic feelings towards their mothers stemming from their mothers' seductive stimulation.

The grandiose achievement of Freud's self-analysis is brought into full relief by perusal of Stendhal's *The Life of Henry Brulard*. Stendhal too starts with the question, What have I been? The posing of the question is analytical, and Stendhal's technique of searching for an answer comes surprisingly close to the technique of free association. But what is the result? Did Stendhal really know more about himself after he came to an end of his autobiography than he knew at the beginning of his journey? Aside from a few childhood memories I do not think that he essentially enriched his knowledge of self. In his thirteenth chapter he writes: 'In writing my life in 1835, I make many discoveries. These discoveries are of two kinds; firstly, they are great pieces of a fresco, long since forgotten, suddenly appearing on a wall, and side by side with these well preserved portions there are . . . great spaces in which one sees nothing but the bricks of the wall. The groundwork, the plaster upon which the fresco was painted, has fallen away and the fresco is forever lost. By those portions of the fresco which still subsist there is no date. . . . Luckily an anachronism, a confusion of one or two years, is of little importance.' And in Chapter xvii: 'I cannot see the real aspect of things, I have only the memories of a child. I see pictures, I remember their effect on my heart, but as to their causes and character, there is a blank. It is always like the frescoes of the Campo Santo at Pisa, where one sees clearly an arm, but the piece beside it which represented the head has fallen away.'

Stendhal's metaphor is surprisingly reminiscent of those Freud used in his writing, but the novelist has recourse to it for the description of his failure in trying to do what the scientist achieved so superbly sixty years later, when an anachronism, a confusion of one or two years, is no longer of little importance but a problem which may shatter the whole edifice of self-understanding; the frescoes of the Campo Santo become visible in their totality. No, Stendhal's writing of his autobiography must not be identified with the lifting of a repression, which, as we know, took place in Freud's self-analysis. As far as can be guessed, Freud's self-analysis went far beyond the discovery of his own œdipus complex. It certainly did not rest on a collection of childhood memories, but included an undetermined number of interpretations and the removal of resistances, and it led to the accessibility of childhood memories which, without the ego's consistent and planned and systematic effort, would have remained in the state of unconsciousness.

Aside from the intellectual achievement involved in Freud's self-analysis, one of the unsolved questions in relation to it concerns, as I have mentioned above, the dynamic pattern of the distribution of psychic energy and the concomitant pain. The history of mankind, however, abounds in records which proclaim the pain and suffering outstanding men were strong enough to bear for the sake of cultural progress. Martyrs of religion and politics naturally come to mind at once. Furthermore, a large number of biographies makes it strikingly evident that the act of mental creation is often linked with unbounded pain and suffering. Hence the mere fact that Freud's self-analysis was probably a painful process would not distinguish it essentially from other creative processes. However, the religious martyr bore pain voluntarily because his act assured to him the certainty of eternal bliss. Other factors, too, could be cited which tend to show that the voluntary martyrdom of the saints may still fall within the scope of the pleasure principle.

Whether the pain involved in artistic creation leads beyond the pleasure principle I do not know, but the study of a good many biographies of artists shows that the act of creation was beyond their decision. Painful as their creative lives may have been they had no choice but to create, and any attempt to evade the suffering of creating would have been followed by more intense suffering. Is this applicable to Freud's self-analysis? When he endured the onrush of his free associations or even tried by a supreme effort of will to force remote and impalpable images into the focus of full attention, did Freud fulfil that indomitable urge to create which so often causes the artist to deplore his existence, or did he bear the pain of self-analysis for the sake of a promised happiness? The process of self-analysis, at the point of human history when Freud conducted it, was, so to speak, against human nature; without prospect of reward, without an inner compulsion or impulsion, the ego seems out of its own resourcefulness to have evolved the firm intention to withstand an inner revulsion and

to bear voluntarily and of its own accord that pain which is for several reasons the most difficult to bear. One may vaguely guess at some of the factors which contributed to Freud's achieving his self-analysis, such as the wealth of new clinical material unfolding itself before him or his indomitable thirst for knowledge. But these and comparable factors, although indispensable to a genius of science, seem to me to be nevertheless peripheral and not even to approach the core of the problem.

Many men in Freud's generation made great sacrifices in the cause of science. There was Holzknecht, for example, whose work in radiology and concomitant exposure to X-rays led to dreadful and lasting disease, and whom Freud, it is said, took as an example when he too became the victim of a lasting and dreadful disease. But this endurance, again, would not make Freud's biography the great psychological enigma it is. Disease involves pains for which no automatic apparatus of escape is at man's disposal. But the escape from a thought or a feeling can be automatic and often occurs with barely any expenditure of energy. Indeed, the avoidance of flight in the face of an evolving thought or recollection often requires expenditure and leads to a complication of psychic life. But nothing is easier for the psychic apparatus than to institute a flight reaction in the face of threatening pain which is attached to a thought or the return of a recollection or the discovery of its meaning. It is the obstinate refusal to allow psychic energy to flow in the path of least resistance which makes me say that Freud's self-analysis was against human nature.

It would be important to investigate most carefully whether, in the history of mankind prior to Freud, there is any known instance of a man piercing his defensive apparatus by the effort of the ego without the ego's structure having become weakened by disease. Even failing such instances it need not follow that no knowledge regarding the configuration which Freud called the œdipus complex had existed prior to Freud's self-analysis. But the fact that Freud was apparently the first human being who could take the fateful step of appropriating part of his own repressed self through his own ego's efforts makes his biography our most important psychological record—until some future day when some person innocent of prior knowledge of psycho-analytic tenets shall chance to accomplish a self-analysis. In view of the negligible probability of such an event one must admit that this aspect of Freud's life has little if any chance of being repeated. Were it merely a matter of learning something of the psychology of the scientific genius we should not need to worry. Geniuses from whom something of the psychology of scientific endowment may be learned will appear sporadically; but later generations may censure us severely and wonder how we could possibly have neglected the sacred task of gathering and collecting any and every document that can still be found to shed light on the gigantic problem of Freud's self-analysis.

The problem *per se* is, I believe, beyond our comprehension, and we must reconcile ourselves to the fact that our generation will not know the answer. But it is our duty to leave to succeeding generations the materials from which later psychologists, keener and better informed than ourselves, may be able to draw conclusions. Since we are utterly ignorant of what factors may have made it possible for Freud to achieve that step against his own nature and against the revulsion of his own ego, we have no other choice but to collect every available document and to investigate any situation susceptible of investigation, and then leave it to posterity to select from the mass of materials we may still be able to hand down whatever it may consider significant and relevant. Even now the most important documents have probably perished.

Let me add one more thought. We are now, there is no doubt, in the midst of a gigantic crisis. This crisis has many aspects. The true nature of the central issues we can only guess, and everyone interested in the matter formulates the issue in accordance with his own experiences, knowledge, and beliefs. One aspect seems to me to be often neglected. The development of society seems to be taking a course which will lead to a state in which the artist and the prophet will be replaced by the scientist. This is a grave and momentous development. The men who for thousands of years gave society new artistic and ethical values were key figures in the structure of society and contributed one kind of the essential stuff which society requires for cohesion and survival. During the last two hundred years this rôle has been increasingly taken over by the scientist. A future in which the artist will play only a minor rôle may appear to us gloomy, dismal, and repugnant. Yet for a long time to come the welfare, the cohesion, and the existence of societies might

depend mainly on the scientist, and in centuries to come his importance will become even greater than it is now.

In inheriting the rôle of prophet and artist the scientist has also inherited society's persecution —which played such a great part in the lives of culturally creative men, and also in Freud's life. The manner in which Freud endured persecution may make his biography exemplary for generations of scientists to come. Yet the tasks which mankind may be facing may demand even greater personal forces than Freud possessed. When science has so enlarged its scope as to embrace the human personality, a similar step must be taken with reference to the human group and society. I think that all great initial scientific discoveries are made against an internal resistance. The evolution of science is based on a consistent course of gross as well as minute internal changes. At some periods these internal changes come to a standstill, and then science becomes repetitive and sterile, devoted merely to working out what the scientific genius had not elaborated in detail, or to preparation for the advent of a new scientific genius. Man's recognition of the laws of society seems to be impeded by particularly strong opposing forces, and in respect to the science of society some scientist will have to point out a way of perceiving that which is evidently potentially visible but as yet imperceptible to the human eye. Then man will have an instrument wherewith to master not only himself but also society, which is to say, his history. In his book on Moses, Freud may have laid the groundwork for this task, but I think we may safely say that the task has not yet been accomplished and that man is still exposed to insuperable historical forces, as he was, up to 1890, to the forces of his own unconscious. In order to lift the secrecy which still surrounds the laws of societal forces a similar process, albeit in a different direction, of breaking through repressive forces may have to be carried out.

Consequently an understanding of Freud's self-analysis may lay the groundwork for a psychological epistemology, that is to say, the science of the psychological conditions under which the ego by its own effort can remove those obstacles which falsify its two most important functions in dealing with reality, to wit, perception and judgment. If this point of view should have any validity, then we cannot foresee the consequences of our knowing how Freud was able to accomplish that of which Archimedes despaired when he exclaimed: 'Give me a place to stand and I will move the earth.'

(Received 2 March, 1951.)

OBITUARY

Dr. FRITZ WITTELS

The psycho-analytic movement has lost one of its earliest and at the same time one of its most active disciples and propagators, Dr. Fritz Wittels, who died on October 16, 1950. He was a fiery and enthusiastic teacher of psycho-analysis both in Europe and in the United States.

Born in 1880 in Vienna, he took his medical degree in 1904. A year later he came into contact with Freud and was deeply impressed by his genius. In 1906 he joined the earliest psycho-analytical circle, which used to meet in Freud's office for the discussion of psycho-analytic problems. But when personal jealousies broke up this circle of disciples in 1910, Wittels left Freud.

This separation was not a desertion. He could never quite detach himself from the profound impression which Freud the man and Freud the scientist produced on him. He remained Freud's admirer, even during the years in which they were not in contact. This comprehension of the historical role of Freud found its expression in the first biography of Freud which Wittels published in 1924. In a warm personal letter to Wittels, Freud pointed out the errors in this biography, but at the same time freely recognized the merits of the book. Not very much later Wittels rejoined the psycho-analytic movement and became one of the most ardent propagators of Freud's work and thought.

In 1928, at the invitation of Alvin Johnson, he came to the United States and lectured for 10 years at the New School for Social Research, the first to teach Freud's psycho-analysis for the general public in the U.S.A. He joined the New York Psychoanalytic Society in 1932, and from then on participated in the creation and development of the New York Psychoanalytic Institute and in its expanding activities. A member of the teaching faculty, he was tireless in devoting his polyhistoric knowledge, his scholarship, his energies to the training of a new generation of psychiatrists.

His was an extraordinary alert, active and original mind. First and last he was a physician and a teacher; but from the beginning his creative spirit and his intellectual curiosity led him into many other fields. He studied and wrote on social and psychological problems; he published a number of highly original and successful novels, in which his numerous interests are mirrored. But more and more, as the years went on, his creative activity concentrated on his scientific work, to the exclusion of what he came to consider as side-issues. His scientific production was manifold, richly varied, highly original in its conception and bold in its approach. His books and articles number nearly ninety. His publications in the field of psycho-analytic technique and in applied psycho-analysis, particularly in regard to relations between child and family, in the field of mythology, literature, and æsthetics, are lasting contributions to our knowledge. He was the first to apply psycho-analytic investigation to criminology.

Notwithstanding the handicap of his illness, he worked to the last, and was preparing the manuscript of a book shortly to be published when death overtook him.

Psycho-analysis loses in Fritz Wittels a devoted and tireless leader, his students an inspiring teacher, his friends a man of intelligent wit and kindly humour, courageous, yet sensitive—a perceptive, warm-hearted and ever helping friend.

René Spitz.

BOOK REVIEWS

Clinical Studies of Psychoanalysis. By Sandor Lorand, M.D. (New York: International Universities Press, Inc., 1950.)

Dr. Lorand has collected eighteen papers, previously published from 1929 to 1948. With the exception of one paper on the correlation of theory and technique, the collection deals primarily with a considerable amount of clinical material which simply presented illustrates convincingly the accepted Freudian psychodynamic principles. The two very brief papers on 'The Mantle Symbol' and 'On the Meaning of Losing Teeth in Dreams' are particularly good.

It is noteworthy that the clinical material as such stands out often in contrast to the theoretical aspects. For instance, the paper on 'Hypnotic Suggestion' is quite interesting and impressive so far as the case material is concerned; however, the generalizations given in the conclusions are questionable in the light of the researches in hypnosis in the past ten years. Likewise, the clinical data on exhibitionism and scoptophilia in 'The Psychology of Nudism' really have little to do with the title of the paper.

As the author states in his preface, the dynamic approach to understanding the development of the various types of neuroses has not changed up to the present. Throughout the papers the dynamic approach is the one which is stressed with practically no reference to ego psychology. Herein lies the strength of these clinical presentations, and/or their weakness.

Norman Reider.

Elements of Psychoanalysis, edited, with an Introduction and Notes, by Hans Herma, Ph.D., and Gertrud M. Kurth, Ph.D., Foreword by C. P. Oberndorf, M.D., Sol. W. Ginsburg, M.D., Advisory Editor. (Cleveland and New York: The World Publishing Company. Pp. 333.)

The headings under which these 'elements' are treated are: 1. Psychoanalytic Therapy; 2, Elementary Facts and Concepts; 3, Childhood and Adolescence; 4, Family Life; 5, Some Common Problems (Impotence and Frigidity, Masturbation, Homosexuality); 6, Psychosomatic Medicine; 7, Applied Psychoanalysis (Education, Religion, Politics).

The editors' purpose is in their own words 'to acquaint the reader with the basic discoveries of psycho-analysis and with some of the practical problems of living'. It is the lay reader whom they have in mind, and whose avid and ever-increasing interest commands publications such as these. Drs. Herma and Kurth have achieved their purpose in the words of Dr. Oberndorf's foreword 'through careful arrangement and discriminating selection' on the basis of their own 'thorough acquaintance with the subject matter'. The reviewer agrees with this judgment, although he feels that it is applicable in a varying degree to the different topics: some of these are more, others less suited to systematic treatment; to some psychoanalysis has contributed more than to others; some exist only because Freud has established them, others have hardly received his attention. Yet the balance is positive. From the study of several contributions, even students may profit: Hendrick's brilliant summaries on: 'Indications for Psychoanalysis' and 'Therapeutic Results' (two 'classics'), Brill's causerie on the everyday Freudian slip (lively rather than thorough but nevertheless instructive), Herma's admirable introduction to 'The Unconscious' (a model chapter demonstrating that one can speak to the layman while remaining a scientist), and Max Schur's article on 'Psychosomatic Medicine' written especially for this collection and combining a systematic presentation of our scant knowledge with a candid exposé of our ignorance in the field.

Most of the other authors gathered in the anthology are likewise well known in the literature, and the quality of their articles here corresponds to that of their previous publications. Some of these articles are in fact excerpts from books published long ago by August Aichhorn, Anna Freud and Ives Hendrick, and the decision to select them is one for which the editors should be praised. There is finally a small appendix which deserves particular commendation. It is devoted to the correction of 'Some Common Misunderstandings of Psychoanalysis', such as 'Everything is reduced to Sex'; 'Dreams can be readily "understood"', 'Analysis makes one neurotic', 'Nothing should be prohibited to the child', etc., etc. What one admires in these few pages is their clarity, their conciseness, the absence of any concession to the 'popular' taste and the exemplary ease of presentation.

Robert Fliess.

The Inner Experience of a Psycho-analyst. By Theodor Reik. (London: George Allen and Unwin, 1949. Price 21*s*.)

Reik complains 'It is much easier to make a new idea enter the head of the Statue of Liberty than the minds of many psycho-analysts'. I think everyone who has tried to convince a highly critical scientific

public that his discoveries are of importance, will feel great sympathy with these lines. What then is the new idea that causes so much trouble to its creator? Reik recommends us to shift the emphasis both in our thinking and in our interpretations from the meticulous and conscientious analysis of some details in the patient's associations to an intuitive assessment of the whole situation, especially of the patient's actual relation to his analyst. Doubtless a correct idea, but it should not be over-emphasized; it has its rightful place, but so has the detailed analysis of certain details—at least as a sobering counter-balance of some intuitive ideas which might be quite off the target. That is, a sense of proportion is what is needed—and perhaps Reik has strained the proper proportions in his argument to some extent in order to get his point through. But, again, so have we all who have tried to describe some new idea. *Hanc veniam petimusque damusque vicissim.*

Perhaps Reik himself has felt in this way, for time and again he has felt the need to apologize to his readers for having modified some of Freud's theoretical concepts. He pleads guilty to this charge, but at the same time fervently asserts that he has remained a true and loyal pupil of his analyst, his master, and his eventual friend—Freud. He is not alone in this attitude by a long chalk. Indeed, it has become generally accepted—a matter of analytical *bon ton*—to introduce or to end any analytical contribution in this ambivalent way. Like any other conventional hypocrisy, this too is utterly futile. It does not matter at all whether the contributor of a new idea has or has not been loyal to Freud; the only thing that matters is whether the new idea proves to be true or untrue.

Returning to Reik's ' new ' idea, it will certainly have one important consequence, and that is to make the course of analytic treatment much more dramatic. Obviously accepting the pace set by the patient and giving only ' safe ' interpretations creates quite a different atmosphere from having a good hunch as to what the patient's repressed emotions may be and, jumping well ahead of his actual associations, interpreting them almost with the air of a thought-reader. Now this is an old and very vexed problem. What shall the proper course of analysis be? A slow and meticulous working through of every detail, i.e. a careful and gradual building up of an integrated ego? Or, preparing the field and then inducing the patient to some highly dramatic experience, i.e. aiming at a sudden break through of an instinct, leaving the gradual integration of the ego structure to spontaneous healing processes? Reik obviously advocates the latter, and is full of bitter and somewhat superior criticism of the narrow-minded and petty psycho-analytic scholasticism. In my opinion this problem is far from being solved, and a good deal more work is needed before anyone can decide the issue. Perhaps, to some extent, Reik is right in criticizing our present way of working as being guarded and pusillanimous. In any case, we owe him gratitude for pleading the case of the now somewhat out-moded, dramatic form of analytic treatment.

M. Balint.

The Ordinary Devoted Mother and Her Baby. Nine Broadcast Talks (*Autumn*, 1949). By D. W. Winnicott, F.R.C.P. (London: Distributed privately. Copies obtainable by post only. Apply ' Pamphlet ', 47 Queen Anne Street, London, W.1. Post free, 1*s.* 2*d.*)

This little book which is a record of broadcast talks will be extremely valuable to those who have to deal with uneducated mothers. It introduces complicated analytical concepts about the child's inner world and phantasies and his relationship to his mother in very simple and understandable language.

To me the value of this contribution is especially due to the fact that there is no oversimplification of the psychological picture; though the terms ' phantasy ', ' ambivalence ', ' instinct ', etc., do not appear in the text the concepts are introduced almost from the start. Situations are described in terms of internal as well as external reality. The feeding situation for instance is described as one in which the baby's phantasy of an ideal breast meets the reality of a good feeding breast. By showing the constant interaction of the phantasy of the baby and the reality of what mother does, the author tries to give a plastic picture of the mother-baby relationship.

I particularly liked the seventh and eighth chapters, ' The World in Small Doses ' and ' The Innate Morality of the Baby '. Both these chapters show with great simplicity the complicated interaction of the child's inner and outer reality.

Though the author insists that his job is not to give advice, there are quite a few useful hints about the helpful attitude to feeding, weaning and the ' training ' in cleanliness, as well as some warning against current types of misleading advice often given to mothers. There are also a few suggestions about common difficulties due to mothers' own unconscious anxieties. The author contrasts the mother who knows her food is good with the mother anxious about the goodness of her own food in a situation in which the child treats the food as though it was poison. He shows how the mother's own anxiety makes it difficult for her to tolerate such an attitude in the child and increases the child's own suspicions.

I said that the book will be particularly useful for the uneducated mothers. The more educated lay mothers might resent the obvious effort to use only one-syllable words and describe things in the simplest possible terms. And that takes me to my own only serious criticism of the book and that is its tone. Though patronizing and sentimentality

are two attitudes that the author deplores most in other people's relation to the mothers, I often found the general tone of the talks both sentimental and patronizing.

H. Segal.

The Story of My Psychoanalysis. By John Knight. (New York: McGraw-Hill, 1950. Pp. 225. $2.95.)

As the title implies, this is the story of a therapeutic psycho-analysis, told from the viewpoint of the patient. A popular account of a technical subject, it should be appraised both as to its accuracy and its value as entertainment.

The ætiology of the patient's complaint, a gastric ulcer, is well presented in descriptions of his early life, transference reactions and current behaviour, without mention of theories explaining how the conditions portrayed produce these effects. The patient's responses to analytic interpretation, revealed as thoughts and behaviour, illustrate graphically the therapeutic process. The value of this book lies in its presentation of analysis not as a matter of squalid mysteries and fantastic terminology, but as dealing with commonplace realities, too intimate, poignant and important for casual revelation.

Though the book is devoid of sensationalism, it is so well narrated that every reader's interest is held and his sympathy aroused. Despite the form in which it is cast, a modified case history, it is an outstanding achievement in autobiography. It will entertain those well versed in psycho-analysis and reassure those who are not.

Geraldine Pederson-Krag.

Clinical Studies in Psychopathology. A Contribution to the Ætiology of Neurotic Illness. By Henry V. Dicks, M.A., M.D.(Cantab.), F.R.C.P. 2nd Edition. (London: Edward Arnold & Co. 1947. Pp. 238.)

The author calls himself an eclecticist in the field of psychopathology. Although his approach is broadly psycho-analytical he finds some of Jung's and Adler's formulations useful. He claims that some of the views which he presented in the first edition of this book in 1939 are now less at variance with current psycho-analytical theory than they appeared to be at the time. Dr. Dicks is not one of those free-lance psycho-analysts who regard lack of official training an advantage. He stresses the need for brief psychotherapy on psycho-analytical lines, but he emphasizes that those are best fitted for short psychotherapy who have served their apprenticeship as psycho-analysts. He discusses the psychopathology of anxiety states, phobias, hysteria, obsessional states, perversions and drug addiction with the aid of short illustrative case histories. He regards the various forms of psychoneurosis as merely different ways in which the feeling of infantile anxiety is being countered. The first two years of life, when the infant's dependence on the mother is at its height, are the critical period in the development of the personality. The anxiety state is regarded as the basic and the least complicated of the psychoneuroses. Its essence is the regressive reanimation of early infantile anxieties which are inherent in the instinct of self-preservation. The tendency to seek love and security, which is regarded as independent of the sexual instinct, stems from the instinct of self-preservation. In hysteria the author is most impressed by the patient's tendency to dominate the environment in order to remain independent. This tendency is found to conflict with the demands of the sexual instinct. (Here the author follows Suttie and Hadfield.) The Œdipus situation is crucial because it tends to activate infantile anxieties. Phantasies of deprivation of love fused with hatred underlie sexual perversions. In discussing character traits Dr. Dicks again follows Hadfield. They may be simple native equipment; they may be exaggerated, i.e. hypertrophic; or they may be reactive. He accepts the description of character traits in terms of levels of libido development. In the concluding chapter the author states his instinct theory. He distinguishes three biological needs: (1) a self-preserving tendency which is the most fundamental, and which motivates the morbid development in the other two instinctual tendencies which are, (2) the sexual, and (3) the aggressive. He sees the essence of psychotherapy ' in the restoration of the sense of security for the expression of emotional needs of any given individual '. Dr. Dicks points out that the instinct of self-preservation has recently reappeared in the theoretical discussions of psychoanalysts (Brierley a.o.) and he expects that before long it will be installed in its rightful place as the basic biological need.

E. Stengel.

Clinical Applications of Suggestion and Hypnosis. By William T. Heron, M.A., Ph.D., Prof. of Psychology, University of Minnesota.

This little book of 100 pages contains a simple and concise account of the technique of hypnosis, particularly adapted for dentists who wish to remove tension and fear of pain in the dental chair. The technique suggested by the author has several practical items which are omitted in most books on hypnosis. One is the use of little physiological facts, such that it is impossible to open the eyelids if the eyeballs are turned upwards. Hence by using this knowledge the author intensifies the suggestive effect of his hypnosis. He does not claim more for hypnosis than symptomatic relief and does not delve into the unconscious with it. Although there is no actual evidence that crime has ever been committed under the influence of post-hypnotic suggestion, all Hollywood to the con-

trary, the author nevertheless considers it theoretically possible. In general the book is simple, practical, theoretically sound, and restrained by good sense and honesty.

Henry Harper Hart.

Man's Religions. By John B. Noss. (New York: Macmillan Co., 1949. Pp. 812.)

This book is an objective, factual, running description of the history and essential teachings of the principal religions of the world. As much as is possible in dealing with this subject, the author maintains an attitude of fair-minded sobriety, avoiding departure into areas of controversy. It is perhaps for this reason that no mention is made of the deeper insights which psycho-analysis has contributed to our understanding of the phenomenology of religion.

The earlier expositions of comparative religion were primarily theocentric. God's revelation to specially designated members of the human race was the central and unequivocal focus. In such studies, the development of different religions was regarded as a record of the numerous manifestations of divine revelation. In current appraisals, which are considered more scientific, the dynamics of religious development have been shifted from divine revelation to the dynamics of the historical process. The present work is characteristic of this trend. Factors of comparative anthropology, of economic and political geography, receive special emphasis. In discussing the origin and development of man's religious needs, these elements are placed in the forefront.

While such interpretations broaden our understanding of religions, they do not deepen it. It is at this turn that the omission of psycho-analytic insights is most to be regretted. Because it is humanistic, psycho-analysis, of all disciplines, offers the broadest as well as the deepest comprehension. Psycho-analysis is centred in the individual man. It records the growth and development of his capacities and correlates these faculties with the manifold adaptations which the individual must make with himself, with his society, and with his awareness of his place in history and in the universe. Through psycho-analysis we have been enabled to trace the compelling force in religious allegiance. This intense and overwhelming emotional force is of paramount significance in political histories as in case histories. Psycho-analytic research, beginning with Freud and continuing with unremitting interest to this very day, has demonstrated how the powerful affects involved in religious experience are derived from fundamental biological forces which are shaped in relation to social and inter-personal influences. This relationship may be complementary as well as antagonistic. For the social group furthermore, religion serves as an institutionalized experience by which character structure is shaped in conformity with the demands of a social order.

Many examples could be cited from this book to demonstrate how necessary it is to include psycho-analytic concepts of religion. For instance, ethical dualism is discussed without reference to the projection into a religious system of the torturesome ambivalent conflicts which each individual can experience within himself. Clinical practice has shown how for many devotees the freedom from doubt and ambivalence is perhaps the most appealing gratification which religious devotion can afford. Less than a page, for example, is given to a description and definition of totemism. The unconscious trends and the mechanisms in totemism which Freud clarified reappear in one of the most important ceremonies of Christianity. These same trends can be observed in one form or another in almost every major religion.

Especially for those who prize religion highly and who seek in it a potential instrument for saving a world bent on catastrophe, it is important to appreciate what psycho-analysis can unfold about man and his religions.

For the psycho-analyst, *Man's Religions* offers a quick, easily accessible, highly readable storehouse of factual information.

Jacob A. Arlow, M.D.

ABSTRACTS

Martin Waugh. 'Othello: The Tragedy of Iago.' *The Psychoanalytic Quarterly*, 1950, **19**, No. 2, p. 202.

Shakespeare's Othello is studied as a case history of the psychopathology of Iago who is considered the protagonist of the play. He is unconsciously in love with Othello. The drama is produced by Iago's attempts to keep this emotion under repression while achieving his instinctual goal, the elimination of his rival, Desdemona. Reference is made to Cinthio's original story *Il Moro di Venezia* in which Iago is the one who kills Desdemona while she is in the bed-chamber with Othello. By arousing jealousy in Othello, Iago frees himself of the burden of his own jealousy and prevents awareness of his homosexual wishes. Freud's criteria of delusional jealousy are applied to Iago's behaviour.

Author's Abstract.

William L. Pious. 'Obsessive-Compulsive Symptoms in an Incipient Schizophrenic.' *The Psychoanalytic Quarterly*, 1950, **19**, No. 3, p. 327.

Some of the literature pertaining to the nature of neurotic symptoms in psychosis is reviewed. They are in the main considered either as a defence against the psychosis or as masking the psychosis.

Based on the observation of a patient during treatment which lasted 400 hours, the following formulations were arrived at: (1) The psychotic phenomena and the obsessive symptoms occurred episodically and in a particular sequence following experiences of frustration and deprivation; (2) In each instance the sequence started with an abrupt pause in the patient's behaviour, lasting for a very brief time and followed by a complete draining away of his interest and expressiveness. Subsequently, there appeared schizophrenic phenomena, then self-tormenting obsessional-like phantasies followed by less disturbed obsessional neurotic symptoms which in turn were followed by the appearance of object relationships without symptomatology. (3) The psychotic process, whatever its nature, could apparently be localized to the phenomena following the experience of deprivation and could be described only, in the patient's words, as an 'abrupt emptying'. All the subsequent phenomena in each episode up to the re-establishment of object relations were in the nature of restitution and characterized by what the patient called 'focusing'. (4) The process of restitution seemed to be intimately related to what the patient described as 'his mental image of the analyst'. The re-establishment of object relations was invariably associated with a clear and undistorted 'mental image'. (5) Certain of the symptoms which were associated with getting into difficulties and acting as if the trouble voluntarily brought about occurred only during the periods of 'focusing' and appeared to be an archaic way of communicating the problem by acting it out.

The hypothesis is offered that all the observable symptomatology except for the 'abrupt emptying' is in the nature of a restitution. The psychotic process itself is apparently the same as, or related to, the 'abrupt emptying'. The psychoneurotic symptoms are considered to be restitutional in nature and part of the schizophrenic picture rather than a defence in the ordinary sense.

Some of the problems of the technique of treatment are dealt with very briefly. No specific recommendations were possible. In a general way, however, it seemed necessary for the analyst to relate himself to the ego qualities that the patient showed at any particular time. On the basis of this particular case, technical manœuvres could be evaluated by the way the patient subsequently described 'his mental image' of the analyst.

Author's Abstract.

Sidney J. Baker. 'Autonomic Resistances in Word-Association Tests.' *The Psychoanalytic Quarterly*, 1951, **20**, No. 2, p. 275.

The author of this paper has in recent years been concentrating on linguistic psychology with special emphasis on the psycho-analytic aspects of language. His Theory of Silences is based on an observation that there are two main forms of interpersonal silence: (1) the 'negative' silence found in situations of anger, fear, hatred and 'psychological blocking' which are all characterized by acute interpersonal and intrapersonal tensions or psychic disequilibrium; (2) the 'positive' silence of tranquil agreement and mutual understanding (reciprocal identification) as fleetingly achieved between lovers and intimate friends and characterized by absence of tensions between the speech partners. The author asserts that the whole speech field is found between these two extremes of silence; that all speech acts serve to release intrapersonal tensions; that the unconscious end-object of all speech is not continued speech but silence in which all tensions have been dissipated.

The present paper deals with material relating to this theme that the author gathered in the course of taking word-tests. It could be reported that when testees were confronted with demands to associate

to certain words they frequently made 'extra-lingual' responses either before or after (sometimes both) giving formal responses to stimulus words. Among these extra-lingual responses the author lists mumbled or broken sentences, laughs, coughs, throat clearing, sighs, deep breaths, borborygms, one case of hiccups and the passing of anal flatus.

It is suggested that these acts are largely of a kind deriving from innervation of the autonomic nervous system and that they all denote resistances in testees. Since, according to his Theory of Silences, the unconscious aim found in all interpersonal speech situations (of which the word-test is one) is the achievement of silence in equilibrium and reciprocal identification between speech partners, the extra-linguistic acts occurring in word-tests are, in his view, to be regarded as (1) aggressions directed against the obstructive person of the tester, (2) infallible indications of affect relating to certain stimulus words, and, above all (3), as evidence of the way in which a speaker unconsciously releases intrapersonal psychic tensions through the medium of the speech act.

Author's Abstract.

'Historical Notes: A Letter from Freud.' *The American Journal of Psychiatry*, April, 1951, **107**, No. 10, pp. 786 and 787.

An anonymous correspondent calling herself 'A Grateful Mother' had sent to Dr. Kinsey a letter written by Sigmund Freud on April 9, 1935. Dr. Kinsey has given a photostatic copy to the *Journal*, which reproduces the handwritten document. In this letter Freud writes:

'I gather from your letter that your son is a homosexual. I am most impressed by the fact that you do not mention this term yourself in your information about him. May I question you why you avoid it? Homosexuality is assuredly no advantage, but it is nothing to be ashamed of, no vice, no degradation, it cannot be classified as an illness; we consider it to be a variation of the sexual function produced by a certain arrest of sexual development. Many highly respectable individuals of ancient and modern times have been homosexuals, several of the greatest men among them (Plato, Michelangelo, Leonardo da Vinci, etc.) It is a great injustice to persecute homosexuality as a crime and cruelty too. If you do not believe me, read the books of Havelock Ellis.

'By asking me if I can help, you mean, I suppose, if I can abolish homosexuality and make normal heterosexuality take its place. The answer is, in a general way, we cannot promise to achieve this. In a certain number of cases we succeed in developing the blighted germs of heterosexual tendencies which are present in every homosexual; in the majority of cases it is no longer possible. It is a question of the quality and the age of the individual. The result of treatment cannot be predicted.

'What analysis can do for your son runs on a different line. If he is unhappy, neurotic, torn by conflicts, inhibited in his social life, analysis may bring him harmony, peace of mind, full efficiency, whether he remains a homosexual or gets changed. If you make up your mind he should have analysis with me—I don't expect you will—he has to come over to Vienna. I have no intention of leaving here. However, don't neglect to give me your answer.' Freud then adds a postscript: 'I did not find it difficult to read your handwriting. Hope you will not find my writing and my English a harder task.' The editors of the *American Journal of Psychiatry* are to be congratulated for reproducing and reprinting this interesting document.

Martin Grotjahn, M.D.

(Permission to reprint this letter is gratefully acknowledged to the Editor of the *American Journal of Psychiatry* and to the Sigmund Freud Copyright Ltd., London.)

'Discussion on the Treatment of Obsessiona Neuroses', June 13, 1950. *Proceedings of the Royal Society of Medicine, Section of Psychiatry*, 1950, **43**, 999–1010.

Dr. Emanuel Miller in opening the discussion declared his belief in the validity of Freudian psychodynamics but felt himself free in treatment to use such ancillary methods as occasion demanded. He gave notes from a series of case records to illustrate the complex nature of the condition, for not only did they present a very wide variety of symptoms but their psychopathology ranged from the later stages of mental organization to those disorders which are mainly psychotic in character. He emphasized that choice of treatment rested on this distinction, and for the clarification of this diagnosis personality studies were essential. He felt there is a very real danger in lightly undertaking analysis where obsessional compulsive states screen a larval schizophrenia. He disapproved of leucotomy being practised in any child before puberty. On the other hand no one should object to leucotomy in extreme cases.

Dr. Karin Stephen gave a concise account of the accepted psycho-analytic views concerning the nature and treatment of obsessional neuroses. She also stressed the fact that severe obsessional neurosis may mask a psychosis, but did not consider this danger was necessarily a bar to the analytic approach, as it would be possible to change over to a supportive type of therapy.

Dr. William Sargant and *Dr. Eliot Slater* regretted that there were no clear-cut indications for the various forms of treatment which were in vogue to-day. They lamented that personal bias and rule of thumb played such a prominent part in the choice of treatment. They gave a short account of their experiences with the physical methods of treatment.

Sleep treatment: only of occasional value as these patients cannot relax; confusional states are often engendered by the excessive doses of narcotics required by these patients. Modified insulin treatment: rarely helps; its effect is often paradoxical, for by increasing the physical well-being the intensity of the conflict is also increased. They had no records of uncomplicated obsessionals being improved by insulin coma. They pointed out that endogenous depression is frequently a symptom of the obsessional constitution and it is here that electroshock has proved itself of the greatest value, especially when there is retardation combined with early morning wakefulness and morning depression, but when the depression is more marked in the evening and sleep good, there is the danger that shock treatment may make the patient worse. They define that the good effects of shock treatment are limited to the relief of depression and retardation, but that it has no effect on tension. When, however, tension and compulsive symptoms are secondary to depression these will clear. Their experience has been that E.C.T. and drug abreactive treatment tends to make the obsessional patient worse. On the other hand, they found that methedrine does not cause dissociation, but the patient is temporarily released from his obsessional preoccupation and is able to re-associate. They regard leucotomy as a treatment for anxiety and tension—the patient improves because his symptom ceases to excite the same emotional response. The best results are obtained from patients with good premorbid personalities. In patients where the obsessional state covers schizophrenia the operation will frequently precipitate this state.

N. Hardcastle.

W. Russell Brain. 'The Cerebral Basis of Consciousness.' Presidential Address. *Proceedings of the Royal Society of Medicine*, 1951, **44**, 38–42.

The author attempts to define what is happening in the nervous system when a conscious state is experienced.

Discussing local sign in sensation he points out that one becomes conscious of the position of a point on the body which has been stimulated because the afferent impulses are perceived in relation to a representation of the body as a whole (unconscious schema or conscious body image), and not in isolation. So the 'big toe area' in the post-central convolution is simply a nodal point at which afferent impulses from that region are brought into relation with the body image as a whole by means of widely ramifying pathways through the posterior halves of both cerebral hemispheres and through the corpus callosum.

An example of disorder of the body image is a lesion in the right parieto-occipital region causing failure to attend to the limbs on the left side, and in extreme cases also failure even to recognize them as part of the body, showing that the same neurones are activated in remembering the body image as in current awareness of it. Again stimulation of various different parts of the cortex can produce visual pictures of remembered scenes, so that the anatomical basis of memory is now looked upon as a widespread neural network which can be set vibrating in an almost infinite variety of patterns in space and time.

The author traces evolution from the most primitive nervous systems which have mainly reflex actions to the higher types which have formed distance-receptors, for reacting to objects at a distance by means of a course of action which takes time. This is made possible by two new types of nervous function—feeling or motive power, and representation of the external world. The organism must possess an enduring representation of the object towards which feeling is being directed for an indefinite time.

Perceptions of objects at a distance occur when the nervous impulses excited in the afferent neurones reach the appropriate end-stations in the brain. They are largely a product of the activity of the nervous system and are 'projected'. With this new power to create representations of the external world appears the potentiality of memory. The author believes that if all perception is a symbolic representation it follows that symbolization is an inherent function of the nervous system, which is seen again in a 'higher' form in speech and thought, which employ symbols to represent perceptual experiences and ideas.

He also discusses unconsciousness, contrasting different types of unconscious state, and suggests correlations with certain observed disturbances of neurological function in the basal nuclei.

S. F. Lindsay.

NEWS, NOTES AND COMMENTS

17th Congress, Amsterdam, August 5–9, 1951. The Congress was attended by more than 350 members and guests of the I.PA.A. and was presided over by Dr. Leo Bartemeier, Detroit, Mich.—Dr. Ernest Jones, Honorary President of the I.PA.A. was present. The official report of the scientific proceedings and of the business meeting will be published in the Bulletin of the International Psycho-Analytic(al) Association.

The following members have been elected for the period 1951–1953: President, Dr. Heinz Hartmann, New York; Vice-Presidents, Mme. Marie Bonaparte, Paris; Miss Anna Freud, London; Dr. Jeanne Lampl-de Groot, Amsterdam; Dr. Philipp Sarasin (Basel); Treasurer, Dr. Maxwell Gitelson (Chicago).

Dr. Ruth S. Eissler, 315, Central Park West, New York 25, has been appointed Secretary of the I.PA.A.

The 18th Congress will be held in Great Britain in 1953.

The American Psychoanalytic Association. At the annual meeting of the American Psychoanalytic Association at the Netherland Plaza Hotel, Cincinnati, Ohio, May 3–6, 1951, the following took office for 1951–1953: President, Robert P. Knight, M.D., Stockbridge, Mass.; President-Elect, Ives Hendrick, M.D., Boston, Mass.; Secretary, LeRoy M. A. Maeder, M.D., Philadelphia, Pa.; Treasurer, William G. Barrett, M.D., San Francisco, Calif. At the business session on the fourth and concluding day of the meeting, the Brill Memorial Medal was presented to the retiring President, M. Ralph Kaufman, M.D., New York City.

The membership totals 428.

The next meeting, the usual *mid-winter* session, will be held at the Waldorf-Astoria Hotel, New York City, December 6–9, 1951; the next *annual* meeting will convene at the Chalfonte-Haddon Hall Hotel, Atlantic City, N.J., May 8–11, 1952.

Philip R. Lehrman, M.D., New York City, continues as the official delegate of the American Psychoanalytic Association to the Council of the American Association for the Advancement of Science.

The Los Angeles Psychoanalytic Society at its Annual Business meeting on June 15, 1951, elected the following officers for the year 1951–1952: President, Ralph R. Greenson; Vice-President, Carel Van der Heide; Secretary-Treasurer, Lincoln Rahman; Executive Councillor to the American Psychoanalytic Association, Charles W. Tidd; Alternate Councillor to the APA., Ralph R. Greenson.

British Psycho-Analytical Society and Institute of Psycho-Analysis, London. At the Annual Business Meeting in July the following Officers, members of Council (Board of Directors of the Institute) and members of committees were elected for the year 1951–1952:

Council: Dr. W. H. Gillespie (Chairman and President of the Institute); Dr. D. W. Winnicott (Training Secretary); Dr. M. Balint (Scientific and Business Secretary); Dr. J. Bowlby, Dr. M. Little and Mr. R. Money-Kyrle (Members without office); *ex officio* members of Council on Board: Dr. W. C. M. Scott (Director of Clinic); Dr. W. Hoffer (Editor of Journal). Secretary of the House Committee: Mrs. B. Sandford.

Training Committee: Dr. W. H. Gillespie (Chairman); Dr. D. W. Winnicott (Secretary); Dr. M. Balint; Miss A. Freud; Mrs. H. Hoffer; Mrs. M. Klein; Dr. S. M. Payne. Library Committee: Mr. M. Masud R. Khan, Dr. C. Rycroft (Joint Librarians), Miss C. de Monchaux.

The Institute and its Clinic, which for twenty-five years had been housed at 96 Gloucester Place, London, W.1, will be transferred to new premises (Mansfield House) in October. All communications, including those to the Editor of the *International Journal of Psycho-Analysis*, should be addressed to: 63 New Cavendish Street, London, W.1.

French Psycho-Analytical Society. The 14th Conference of French-speaking psycho-analysts will be held on November 1, 1951, in Paris. The programme is confined to *the problem of transference.* There will be a theoretical paper by Professor Lagache and a clinical paper by Dr. Schlumberger, both followed by discussions. The conference meets under the auspices of the French Psycho-Analytical Society and will be presided over by its President, Dr. Sacha Nacht.

The Sigmund Freud Archives. A Corporation under the title The Sigmund Freud Archives, Inc., has been formed and registered in the State of New York. Its purposes are (1) to discover, assemble, collect and preserve manuscripts, publications and other documents and information relating to the biography of the late Sigmund Freud, and to his medical, psycho-analytic and other scientific activities, (2) to establish archives of Sigmund Freud material, (3) to engage in research, writing, publishing and other activities relating to the work of Sigmund Freud, and to aid voluntarily and co-operate with other persons and groups who may be engaged in similar or related activities. Dr.

Bertram D. Lewin (New York) has been elected President, and in addition the following officers were also elected: Vice-Presidents: Marie Bonaparte (Paris), Henri Flournoy (Geneva), Heinz Hartmann (New York), Willi Hoffer (London), Ernest Jones (London), Jeanne Lampl-de Groot (Amsterdam), Philipp Sarasin (Basel); Board of Directors: Leo H. Bartemeier (Detroit), Siegfried Bernfeld (San Francisco), Kurt R. Eissler (New York), Ernst L. Freud (London), Heinz Hartmann (New York), Edith B. Jackson (New Haven), Robert P. Knight (Stockbridge), Ernst Kris (New York), Edward Kronold (New York), Bertram D. Lewin (New York), Rudolph M. Loewenstein (New York), Karl A. Menninger (Topeka), Herman Nunberg (New York), Allan Roos (New York), Robert Waelder (Philadelphia); Honorary Members: Albert Einstein, Anna Freud, Ludwig Jekels, Thomas Mann; Treasurer, Ruth S. Eissler; Secretary, K. R. Eissler.

Anyone who is in possession of letters or who knows persons who have such letters, as well as those who knew Freud personally, is urgently requested get in touch with the Archives through their Secretary: K. R. Eissler, M.D., 315 Central Park West, New York 25, N.Y.

The Association for Psychiatric Treatment of Offenders (20 East 84th Street, New York 28, N.Y.) This Association, organized in Spring, 1950, is dedicated to the scientific treatment of criminals. In addition to its clinical service the association holds monthly forum meetings and clinical discussion meetings for therapists and social workers and will shortly begin public lectures for schools on means of preventing and treating delinquency. Chairman, Dr. Melitta Schmideberg; National Consultant, Dr. Benjamin Karpman; President, Dr. Wladimir Eliasberg. The Association is non-profit-making and non-sectarian. Membership is $5 a year, open to all professional people.

Clinical Essay Prize 1951. The Clinical Essay Prize offered by the Institute of Psycho-Analysis, London, has for the year 1951 been awarded to the writer of the essay, ' The Analysis of a Doll Phobia '. The Clinical Prizeman is Leo Rangell, M.D., Los Angeles, California.

PUBLICATIONS RECEIVED

(Appearance in this list does not preclude subsequent review.)

Essays in Applied Psycho-Analysis. Vol. I, Miscellaneous Essays. By Ernest Jones. (London: The Hogarth Press and the Institute of Psycho-Analysis, 1951, The International Psycho-Analytical Library, edited by Ernest Jones, M.D., No. 40, pp. 333. 21*s.*)

Clinical Studies in Psychoanalysis. By Sandor Lorand, M.D. (New York: International Universities Press, 1951, pp. 272. $4.00.)

Wayward Youth. By August Aichhorn. Foreword by Sigmund Freud. Preface by K. R. Eissler, M.D. (London: Imago Publishing Co. Ltd., 1951, pp. 236. 9*s.*)

Die Traumdeutung. By Sigmund Freud. Ninth edition. (Vienna: Franz Deuticke, 1950, pp. 436.)

Christians and Jews. A Psychoanalytic Study. By Rudolph M. Loewenstein. (New York: International Universities Press, 1951, pp. 224. $3.25.)

Emotions and Memory. By David Rapaport, Ph.D. (New York: International Universities Press, pp. 282. $4.00.)

Freud Meister und Freund. Ein subjektives psychologisches Portrait des grossen Psychiaters. By Hanns Sachs. Translated by Emmy Sachs. (London: Imago Publishing Co. Ltd., 1950, pp. 174. 9*s.*)

Psychoanalysis and the Social Sciences. Vol. III. Edited by Geza Róheim, Ph.D. (New York: International Universities Press, 1951, pp. 312. $7.50.)

The Yearbook of Psychoanalysis. Vol. VI. Edited by Sandor Lorand. (New York: International Universities Press, 1950, pp. 307. $7.50.)

Psychoanalysis and Politics. A Contribution to the Psychology of Politics and Morals. By R. E. Money-Kyrle. (London: Gerald Duckworth & Co. Ltd., Social Science Studies, 1951, pp. 183. 9*s.*)

Reality and Dream. Psychotherapy of a Plains Indian. By George Devereux, Ph.D., Prefaces by Karl A. Menninger, M.D., and Robert H. Lowie, Ph.D. Psychological Tests edited and interpreted by Robert R. Holt, Ph.D. (New York: International Universities Press, 1951, pp. 438+12. $7.50.)

Freud: Man and Scientist. The Freud Anniversary Lecture delivered May 14, 1951, at the New York Academy of Medicine in commemoration of the ninety-fifth birthday of Sigmund Freud. By Rudolph M. Loewenstein, M.D. (New York: International Universities Press in collaboration with the New York Psycho-Analytic Institute and Society, 1951, pp. 20.)

Probleme und Ergebnisse der Psychologie. Hundert Jahre Psychologischer Forschung. By J. C. Flugel. Original Title: A Hundred Years of Psychology, 1833–1933. Translated by Clara Bremenkamp and Dr. Anneliese Windrath. (Stuttgart: Ernst Klett, pp. 363.)

The Psycho-Analysis of Elation. By Bertram D. Lewin. (London: The Hogarth Press, 1951, pp. 200. 15*s.*)

Psicoanálisis de los Sueños. By Angel Garma. Second Edition. (Buenos Aires: Association Psicoanalitica Argentina, 1948, pp. 472.)

The Unknown Self. By Georg Groddeck. (London: Vision Press Ltd., 1951, pp. 207. 12*s.* 6*d.*)

The World of Man. By Georg Groddeck. (London: Vision Press Ltd., 1951, pp. 271. 18*s.*)

Organization and Pathology of Thought. Selected Sources. Translation and Commentary by David Rapaport, Ph.D. (New York: Columbia University Press, 1951, Austen Riggs Foundation Monograph No. 1, pp. 786. $10.00.)

Max Eitingon. In Memoriam. Edited by Dr. M. Wulff on behalf of Hachewrah Hapsychoanalyith b'Israel, 1949 (Jerusalem: Israel Psycho-Analytical Society, 1950, pp. 273.)

Soviet Psychiatry. By Joseph Wortis, M.D. (Baltimore: The Williams & Wilkins Co., 1950. (London: Baillière, Tindall & Cox, pp. 314. $5.00. 38*s.* 6*d.*)

The Story of my Psychoanalysis. By John Knight. (New York: McGraw Hill Publishing Co., pp. 225. $2.95.)

Principles of Intensive Psychotherapy. By Frieda Fromm-Reichmann. (University of Chicago Press, pp. 246. $3.75.)

Psychology and the Soul. By Otto Rank. Translation of Seelenglaube und Psychologie, by William D. Turner. (Philadelphia: University of Pennsylvania Press, 1950, pp. 195. $3.50. London: Geoffrey Cumberlege. 28*s.*)

Neurosis and Human Growth. The Struggle Toward Self-Realization. By Karen Horney. (London: Routledge and Kegan Paul, 1951, pp. 391. 21*s.*)

Dogma and Compulsion. Psychoanalytic Studies of Myths and Religions. By Theodor Reik. (New York: International Universities Press, 1951, pp. 332. $5.00.)

Introduction to Social Psychology. By Otto Friedman. (London: Sylvan Press, 1950, pp. 220. 10*s.* 6*d.*)

Recent Progress in Psychiatry. Special Issue of

the *Journal of Mental Science* (the *British Journal of Psychiatry*). By G. W. T. H. Fleming (Ed.) (London: J. & A. Churchill Ltd., pp. 703. 50*s*.)

Psychiatry for Social Workers. By Lawson G. Lowrey, M.D. Second Edition. (New York: Columbia University Press; London: Geoffrey Cumberlege, Oxford University Press, pp. 385. 30*s*.)

Vocational Rehabilitation of Psychiatric Patients. By Thomas A. C. Rennie, M.D., Temple Burling, M.D., and Luther E. Woodward, Ph.D. (New York: Commonwealth Fund, 1950, pp. 133. $0.75; London: Geoffrey Cumberlege, Oxford University Press. 6*s*.)

Thomas W. Salmon, Psychiatrist. By E. D. Bond, M.D., with the collaboration of Paul O. Komora. (New York: W. W. Norton & Co. Inc.; London: Chapman & Hall Ltd., 1950, pp. 235. 15*s*.)

The Day Hospital. An Experiment in Social Psychiatry and Syntho-Analytic Psychotherapy. By Joshua Bierer, M.D., D.Econ. (London: H. K. Lewis & Co. Ltd., 1951, pp. 56.)

How Psychiatry Helps. By Phillip Polatin, M.D., and Ellen C. Philtine. Foreword by Nolan D. C. Lewis, M.D. (Kingswood, Surrey: The World's Work (1913) Ltd., 1951, pp. 249. 10*s*. 6*d*.)

Personality and Psychotherapy. By John Dollard and Neal E. Miller. (New York: McGraw Hill Publishing Co., pp. 488. $5.00.)

Values and Personality. By Werner Wolff, Ph.D. (New York: Grune and Stratton, pp. 239. $4.75.)

Noses. By Dr. Harold M. Holden. (Cleveland, Ohio, and New York: World Publishing Co., pp. 252. $3.50.)

How to Look at Illness. A new approach to illness and health based on the work of Dr. Rudolf Steiner. By Dr. Norbert Glas. (London: New Knowledge Books, 1951, pp. 48. 3*s*.)

Psychosomatics and Suggestion Therapy in Dentistry. By Jacob Stolzenberg, D.D.S. (New York: Philosophical Library, pp. 152. $3.75.)

Die Sexualität bei Tuberkulosen. By H. Westermann. (Stuttgart: Georg Thieme Verlag, 1950. Tuberkulose-Bücherei, edited by Dr. Rolf Griesbach and Professor Dr. Otto Wiese, pp. 30.)

The Rhesus Danger. Its Medical, Moral and Legal Aspects. By R. N. C. McCurdy. (London: William Heinemann Medical Books Ltd., 1950, pp. 138. 5*s*.)

A Handbook of Sex Education. By Theodore Faithful, M.R.C.V.S. (London and Birmingham: Rylee Ltd., 1950, reprinted 1951, The Thesis Library, pp. 115. 8*s*. 6*d*.)

Infant Speech. A Study of the Beginnings of Language. By M. M. Lewis, M.A., Ph.D. (London: Routledge & Kegan Paul Ltd., 1951, second edition, pp. 383. 28*s*.)

Communication. The Social Matrix of Psychiatry. By Jurgen Ruesch, M.D., and Gregory Bateson. (New York: W. W. Norton & Co., pp. 314. $4.50.)

Psychologie des Traumbewusstseins. By Robert Bossard. (Zürich: Rascher Verlag, 1951, pp. 418. Fr. 19.80.)

Das Ich und die Regulationen des Erlebnisvorganges. By F. S. Rotschild. (Basle: S. Karger Verlag, A. G., Basel, 1950, pp. 388. s.fr. 35.00.

An Introduction to Modern Psychology. By O. L. Zangwill. (New York: Philosophical Library, 1950, pp. 227. $3.75.)

Paracelsus. Selected Writings. Edited with Introduction by Jolande Jacobi. Translated by Norbert Guterman. Foreword by C. G. Jung, Originally published in German as 'Theophrastus Paracelsus: Lebendiges Erbe', by Rascher Verlag, Zurich, 1942. (London: Routledge & Kegan Paul Ltd., 1951, pp. 347. 25*s*.)

Elements of Psychoanalysis. Edited, with an Introduction and Notes, by Hans Herma, Ph.D., and Gertrud M. Kurth, Ph.D. Foreword by C. P. Oberndorf, M.D., Sol Ginzburg, M.D., Advisory Editor. (Cleveland, Ohio and New York: The World Publishing Co., pp. 333. $3.00.)

Threshold of the Abnormal. By Werner Wolff. (New York: Hermitage Press, pp. 473. $6.50.)

Psychoanalysis and Religion. By Erich Fromm. (London: Victor Gollancz, 1951, pp. 126. 10*s*. 6*d*.

Unraveling Juvenile Delinquency. By Sheldon and Eleanor Glueck. (New York: The Commonwealth Fund, pp. 399. $5.00.)

The Science of Change. By Horace C. Levinson. (New York: Rinehart and Company, Inc., pp. 341. $2.00.

Report of the Governor's Study Commission on the Deviated Criminal Sex Offender. (State of Michigan, 1951, pp. 245.)

A Citizens' Handbook of Sexual Abnormalities and the Mental Hygiene Approach to their Prevention. A Report to the Committee on Education of the Governor's Study Commission on the Deviated Criminal Sex Offender. By Samuel W. Hartwell. Foreword by the Rev. Ralph M. Richards. (State of Michigan: 1950, pp. 71.)

Body—Mature Behavior. By N. Feldenkrais, (New York: International Universities Press, pp. 167. $3.75.)

Frustration—The Study of Behavior Without a Goal. By Norman R. F. Maier. (New York: McGraw Hill Publishing Co., pp. 264. $3.50.)

Auto-Erotism. A Psychiatric Study of Masturbation and Neurosis. By Wilhelm Stekel, M.D., Foreword by Emil A. Gutheil, M.D. Introduction by Frederic Wertham, M.D. Authorized translation by James S. Van Teslaar, M.D. (London and New York: Peter Nevill Ltd., 1951, pp. 289. 16*s*.)

On the Cause of Homosexuality. By G. V. Hamilton and G. Legman. (New York: Breaking Point, 1950, pp. 31.)

Inferiority Feelings in the Individual and the Group. By Oliver Brachfeld. Translated by

Marjorie Gabain. (London: Routledge and Kegan Paul Ltd., 1951, pp. 301. 25*s.*)

Clinical Applications of Suggestion and Hypnosis. By William T. Heron, M.D., Ph.D. (Springfield, Ill.: Charles T. Thomas, pp. 116. $3.00.)

The Folklore of Sex. By Albert Ellis, Ph.D. (New York: Charles Boni, 1951, pp. 313. $5.00.)

Kierkegaard: The Analysis of the Psychological Personality. An Existential Study of Religion and Type Psychology. By Rudolph Friedmann. (London: Peter Nevill, 1949, pp. 88. 3*s.* 6*d.*)

Biography of the Gods. By A. Eustace Haydon. (New York: The Macmillan Co., pp. 352. $3.50.)

Man's Religions. By John B. Noss, Ph.D. (New York: The Macmillan Co., pp. 812. $6.00.)

Introduction to a Science of Mythology. The Myth of the Divine Child and the Mysteries of Eleusis. By C. G. Jung and C. Kerenyi. Translated by R. F. C. Hull. (London: Routledge and Kegan Paul Ltd., 1951, pp. 289. 25*s.*)

Religion and the Cure of Souls in Jung's Psychology. By Hans Schaer. Translated by R. F. C. Hull. (London: Routledge and Kegan Paul Ltd., 1951, pp. 226. 16*s.*)

Diagnosis de la Pesia y su arquetipo. By Ernesto Daniel Andia. (Buenos Aires: Editorial 'El Ateneo', 1951, pp. 335.)

Le test du Labyrinthe. By Frédy Chapuis. (Berne: Hans Huber, 1949, pp. 139 with 57 illustrations. fr.s. 12.50.)

Graphologia II. By Dr. Max Pulver (Ed.). Beiheft zur Schweizerischen Zeitschrift fur Psychologie und ihre Anwendungen. (Bern: Hans Huber, 1949, pp. 91. Fr. 6.80.)

Any Wife or Any Husband. By 'Medica'. (London: William Heinemann Medical Books Ltd., 1950, pp. 159. 7*s.* 6*d.*)

Why are you Single? Compiled by Hilda Holland. (Kingswood, Surrey: The World's Work (1913) Ltd., 1950, pp. 220. 9*s.* 6*d.*)

Negligence without Fault. By Albert A. Ehrenzweig. (Berkeley and Los Angeles: University of California Press; London: Cambridge University Press, 1951, pp. 95. $2.00.)

Grammaire et Affectivité. By Francois Rostand. (Paris: Librairie Philosophique J. Vrin, 1951, pp. 269.)

Studies in the Social Psychology of Adolescence. By J. E. Richardson, J. F. Forrester, J. K. Shukla, P. J. Higginbotham, edited with a foreword by C. M. Fleming. International Library of Sociology and Social Reconstruction, Editor: Dr. Karl Mannheim. (London: Routledge and Kegan Paul Ltd., 1951, pp. 266. 21*s.*)

Brain and Personality. Studies in the Psychological Aspects of Cerebral Neuropathology and the Neuropsychiatric Aspects of the Motility of Schizophrenics. By Paul Schilder, M.D., Ph.D. (New York: International Universities Press; second printing, 1951, pp. 136. $2.50; London: from Bailey Bros and Swinfen Ltd. 20*s.*)

Psychoanalysis and Anthropology. Culture, Personality and the Unconscious. By Géza Róheim. (New York: International Universities Press, 1950, pp. 496. $10.00; London: from Bailey Bros. and Swinfen Ltd. 80*s.*)

Introduction to a Psychoanalytic Psychiatry. By Paul Schilder, M.D., Ph.D., authorized translation by Bernard Glueck, M.D. (New York: International Universities Press, second printing, 1951, pp. 178. $3.25; London: from Bailey Bros. and Swinfen Ltd. 26*s.*)

Psychotherapy. By Paul Schilder, M.D., Ph.D. Enlarged and Revised Edition arranged by Lauretta Bender, M.A., M.D. (London: Routledge and Kegan Paul, 1951, pp. 396. 30*s.*)

Symbolic Realization. A New Method of Psychotherapy Applied to a Case of Schizophrenia. By M. A. Sechahaye. Monograph Series on Schizophrenia No. 2. (New York: International Universities Press, 1951, pp. 184. $3.25; London: from Bailey Bros. and Swinfen. 26*s.*)

Nietzsche: Philosopher, Psychologist, Antichrist. By Walter A. Kaufmann. (Princeton, N.J.: Princeton University Press, 1950, pp. 409. $6.00; London: Geoffrey Cumberlege, Oxford University Press. 40*s.*)

General Theory of Neuroses. Twenty-two Lectures on the Biology, Psychoanalysis and Psychohygiene of Psychosomatic Disorders. By Rudolf Brun, M.D. Translated by Bernard Miall. (New York: International Universities Press, 1951, pp. 469. $10.00.)

En Psykoanalyse af Søren Kierkegaard. By Sigurd Næsgård. (Odense, Denmark: Psykoanalytisk forlag, Paul Høymark, 1950. pp. 149.)

BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTIC(AL) ASSOCIATION

EDITED BY
DR. GRETE L. BIBRING, GENERAL SECRETARY

LIST OF MEMBERS OF THE INTERNATIONAL PSYCHO-ANALYTIC(AL) ASSOCIATION

The following additions to the list published in Part 4, Volume XXXI, 1950, have been found necessary:

Argentine Psychoanalytic Association.
Add: Dr. Enrique Pichon Riviere (President), Copernico 2350, Buenos Aires, Argentina.

Dutch Psycho-Analytical Society.
Add: Dr. P. H. C. Tibout, Reynier Vinkeleskade 54, Amsterdam-Zuid.

New York Psychoanalytic Society.
Add: Eissler, Dr. Ruth S., 315 Central Park West, New York 25.

LETTER TO THE EDITOR

SIR,

There is a sentence in Dr. Martin James's very flattering review of my translation of Freud's *Beyond the Pleasure Principle* in Vol. 32 (p. 248) of the *Journal* which calls for correction. He writes that '*Schmerz* and *Unlust* are both rendered " Unpleasure " so that we do not any longer have to remember the difference between " Pain " and pain as we did before.'

This is not the case. The German words *Schmerz* and *Unlust* have quite different meanings. In some of the earlier translations of Freud the distinction was rendered in English by printing the word *pain* in inverted commas when it stood for *Unlust* and without them when it stood for *Schmerz*. This led to the greatest confusion in many passages, culminating in a sentence in ' Mourning and Melancholia ' in which Freud speaks of *Schmerz-Unlust*. This would have had to be translated *the* '*pain*' *of pain*. After many hesitations and discussions I decided that in all my translations I would systematically render *Schmerz* by *pain* and *Unlust* by *unpleasure*. And I have followed this rule in *Beyond the Pleasure Principle*.

Anyone who feels a literary repugnance to the word ' unpleasure ' may find consolation in the fact of its having already been used by Coleridge at the beginning of the nineteenth century.

Yours faithfully,
James Strachey.

DR. JOHN RICKMAN

It is with deep regret that we announce the death of our colleague on the Editorial Committee, Dr. John Rickman. He died suddenly on July 1st, 1951.

An obituary will appear in the next Number of the Journal.

W. Hoffer.
C. P. Oberndorf
W. Clifford M. Scott

ERRATA

The Book Review of 'The Life and Works of Edgar Allan Poe. A Psycho-Analytic Interpretation', by Marie Bonaparte, reviewed by Victor Kanter in Part I of this volume. The last line, 2nd paragraph, page 60, should read as follows: a fatal drinking bout.

VOL. XXXII 1951 PART II

THE INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS

and Bulletin of the

INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

FOUNDED BY ERNEST JONES

Editor

W. HOFFER

London

with the assistance of

JOHN RICKMAN
London

W. CLIFFORD M. SCOTT
London

C. P. OBERNDORF
New York

In collaboration with

LEO H. BARTEMEIER, *Detroit*
G. BOSE, *Calcutta*
MORRIS W. BRODY, *Philadelphia*
REX E. BUXTON, *Washington*
M. MAURICE DUGAUTIEZ, *Brussels*
ERIK H. ERIKSON, *San Francisco*
ANGEL GARMA, *Buenos Aires*
W. H. GILLESPIE, *London*
ERNEST JONES, *London*
G. HENRY KATZ, *Philadelphia*
M. RALPH KAUFMAN, *New York*
HARRY B. LEE, *Chicago*
P. J. VAN DER LEEUW, *Amsterdam*
DAVID M. LEVY, *New York*
DURVAL MARCONDIES, *Sao Paulo*
KIYOYASU MARUI, *Hirosaki*
IGNACIO MATTE-BLANCO, *Santiago*
WILLIAM C. MENNINGER, *Topeka*
MILTON MILLER, *Beverley Hills*
RENE D. MONCHY, *Stockholm*
CARL MUELLER-BRAUNSCHWEIG, *Berlin*
JOHN M. MURRAY, *Boston*
SACHA NACHT, *Paris*
H. WHITMAN NEWELL, *Baltimore*
HERMAN NUNBERG, *New York*
NICOLA PEROTTI, *Rome*
PHILIP SARASIN, *Basle*
RICHARD STERBA, *Detroit*
CHARLES W. TIDD, *Los Angeles*
ALFRED WINTERSTEIN, *Vienna*
M. WULFF, *Tel-Aviv*

PUBLISHED FOR
THE INSTITUTE OF PSYCHO-ANALYSIS
BY
BAILLIERE, TINDALL AND COX, LTD.

THE
INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS

is issued quarterly. Besides Original Papers, Abstracts and Reviews, it contains the *Bulletin* of the International Psycho-Analytical Association.

NOTICES

EDITORIAL

1. All manuscripts and editorial communications, as well as review copies of books and exchange numbers of periodicals, should be sent to the Editor, International Journal of Psycho-Analysis, Institute of Psycho-Analysis, 63 New Cavendish Street, London, W.1.

2. Editorial communications from U.S.A. should be sent to Dr. C. P. Oberndorf, 40 West 59th Street, New York.

3. Manuscripts, which should represent the final form of the material, should be typewritten, with *wide* spacing throughout (*including especially the footnotes*); handwritten corrections must be legible and kept to a minimum. A copy should always be retained by the author. All *references* should include: name of author, title of article, title of Journal, year, volume, first and last pages or individual pages. *Bibliographies* should be in alphabetical order. When books are cited include author, title, year of publication and publisher. Authors are requested to omit numbers from bibliographies and arrange same alphabetically.

4. Authors of original papers will be sent free of charge three copies of the Journal *on application*; a form of application for these copies or alternatively for reprints at the author's own cost will be sent by the Editor together with the page proofs.

5. All matter in this Journal is protected under the Berne Convention. It may not be reproduced by any means, in whole or in part, without permission. Application with regard to reproduction should be addressed to the publishers.

ADMINISTRATIVE

1. The Annual Subscription is 50*s*. per Volume of Four Parts. U.S.A. $8.50.

2. The Journal is obtainable *by subscription only*, the parts not being sold separately.

3. Subscriptions and Correspondence relative to advertising and administrative matters in general should be addressed to the Publishers, Bailliere, Tindall & Cox, Ltd., 7 & 8 Henrietta Street, Covent Garden, London, W.C.2.

4. Unbound copies of some of the back volumes are available. Prices on application to the Publishers.

STUDENTS' SUBSCRIPTION

Subscription to the International Journal of Psycho-Analysis at reduced rates of 25*s*. (U.S.A. $4.25) is offered to Students in Training who are registered with an Institute or Training Centre recognized by the International Psycho-Analytical Association. Students' Subscriptions can only be accepted by the Secretary, The Institute of Psycho-Analysis, 63 New Cavendish Street, London, W.1. The Training Secretaries (Secretaries of the Educational Committees) are invited to send in the list of students of their Institutes who subscribe at the reduced rates. Remittances (U.S.A., $4.25, other countries, 25*s*.) should accompany the list of Student Subscribers. Extension of Students' Subscription to other categories of students is under consideration. It has to be understood that the Student Subscriber will not sell the Journal supplied under this scheme for a period of five years after the date of issue.

All editorial communications should be addressed to the Editor, International Journal of Psycho-Analysis, Institute of Psycho-Analysis, 63 New Cavendish Street, London, W.1.

Reprinted March, 1952

INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS
VOL. XXXII 1951 PART II

ORIGINAL PAPERS

PAGE

HERBERT READ. PSYCHO-ANALYSIS AND THE PROBLEM OF ÆSTHETIC VALUE 73

EVA M. ROSENFELD. THE PAN-HEADED MOSES—A PARALLEL 83

SIGM. FREUD. POSTSCRIPT TO MY PAPER ON THE MOSES OF MICHELANGELO (UNTRANSLATED FREUD) 94

EMILIO SERVADIO. AN UNKNOWN STATUETTE OF MOSES 95

DAVID BERES, M.D. A DREAM, A VISION, AND A POEM..... 97

WALTER BROMBERG, M.D. A PSYCHOLOGICAL STUDY OF MURDER 117

MERLIN THOMAS. SEXUAL SYMBOLISM IN INDUSTRY 128

OBITUARY

JOHAN H. W. VAN OPHUIJSEN..... 134

BOOK REVIEWS

136

NEWS, NOTES AND COMMENTS

13

Published Quarterly. Annual Subscription 50s. U.S.A. $8·50.

World List of Abbreviations :
Int. J. Psycho-Anal.

Printed in Great Britain by
The Whitefriars Press Ltd.
London and Tonbridge.
April, 1951